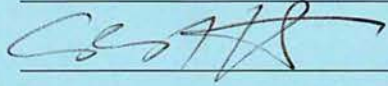


# CONTRACT ROUTING SHEET

Date Prepared: \_\_\_\_\_

Need Date: \_\_\_\_\_

**PROCESSING DEPARTMENT:**

Department: CAO  
Dept. Contact: Sue Hennike  
Phone #: 5577  
Department Authorization: 

**CONTRACTOR:**

Name: Martha Shaver  
Address: 8151 Deer Ridge Lane  
lone, CA 95640  
Phone: \_\_\_\_\_

**CONTRACTING DEPARTMENT:** CAO

Service Requested: Policy and Ordinance Review and Consultation  
Contract Term: 3+ years AMD Value: -\$60,000  
Compliance with Human Resources requirements? Yes: x No: \_\_\_\_\_  
Compliance verified by: \_\_\_\_\_

**COUNTY COUNSEL:** (Must approve all contracts and MOU's)

Approved:  Disapproved: \_\_\_\_\_ Date: 6/18/2014 By: J. Santalero  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

EL DORADO COUNTY COUNSEL  
4 JUN 16 4:03

*With changes as noted.*

*Changes made. Ok 6/18/14*

*Return to P+C*

*Call Terri Knowlton x 5577*

**RISK MANAGEMENT:**

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_