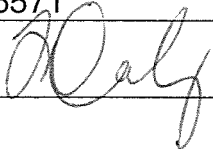


CONTRACT ROUTING SHEET

Date Prepared: 3/21/13

Need Date: 3/22/13

PROCESSING DEPARTMENT:

Department: Chief Administrative Office
Dept. Contact: Terri Knowlton
Phone #: 621-5571
Department
Head Signature: 

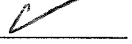
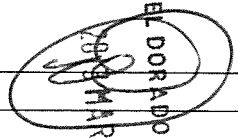
CONTRACTOR:

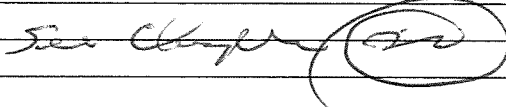
Name: Resolution for carnival operation
Address: by Butler Amusements, Inc.
Phone: _____

CONTRACTING DEPARTMENT: N/A

Service Requested: Review draft resolution for carnival event.
Contract Term: N/A Contract Value: \$0.00
Compliance with Human Resources requirements? Yes: _____ No: _____
Compliance verified by: N/A

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

Approved:  Disapproved: _____ Date: 3/21/13 By: 
Approved: _____ Disapproved: _____ Date: _____ By: _____



EL DORADO COUNTY COUNSEL
MAR 21 PM 5:08

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)

Approved: _____ Disapproved: _____ Date: _____ By: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).

Departments: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____