

CONTRACT ROUTING SHEET

Date Prepared: 7/19/06

Need Date: _____

PROCESSING DEPARTMENT:

CONTRACTOR:

Department: CAO/Proc. & Contracts
Dept. Contact: Pam Carlone
Phone #: 5833
Department: _____
Head Signature: Bonnie H. Rich
Bonnie H. Rich

Name: Shred-It Reno, Inc.
Address: P.O. Box 13047
Reno, NV 89507
Phone: 775-853-1212

CONTRACTING DEPARTMENT: CAO/Procurement & Contracts

Service Requested: Document Destruction County-Wide – East Slope
Contract Term: 2 Years Contract Value: \$20,000
Compliance with Human Resources requirements? Yes: _____ No: _____
Compliance verified by: _____

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

Approved: Disapproved: _____ Date: 7-26-06 By: [Signature]
Approved: _____ Disapproved: _____ Date: _____ By: _____

ASSIGNMENT

DATE: 07/21/2006
ATTORNEY: ETD KRW
DEPT./INDEX NO.: 020/100
BY: [Signature]

EL DONADO COUNTY COUNSEL
2006 JUL 19 PM 1:20
A10

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: Disapproved: _____ Date: 7/28/06 By: [Signature]
Approved: _____ Disapproved: _____ Date: _____ By: _____

JUL 28 2006

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

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