

# CONTRACT ROUTING SHEET

Date Prepared: 7/9/2009

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

**PROCESSING DEPARTMENT:**

Department: County Counsel  
Dept. Contact: Louis B. Green  
Phone #: (530) 621-5770  
Department  
Head Signature: *Louis B. Green*

**CONTRACTOR:**

Name: Scharff, Brady & Vinding  
Address: 400 Capitol Mall, Suite 2640  
Sacramento, CA 95814  
Phone: \_\_\_\_\_

**CONTRACTING DEPARTMENT:** County Counsel

Service Requested: Legal services for representation of the County in the case of Sayegh v. County of El Dorado, et al., El Dorado County Superior Court Case No. PC20090366

Contract Term: \_\_\_\_\_ Contract Value: \_\_\_\_\_

Compliance with Human Resources requirements? Yes: X No: \_\_\_\_\_

Compliance verified by: \_\_\_\_\_

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

Approved:  Disapproved: \_\_\_\_\_ Date: 7/9/09 By: *Z. Kelly*  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

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PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved:  Disapproved: \_\_\_\_\_ Date: 7/9/09 By: *MB*  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

*Conf counsel to supply update list of income.*  
*MB*

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

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

RECEIVED  
RISK MANAGEMENT  
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