


# CONTRACT ROUTING SHEET

Date Prepared: 06/02/2014

Need Date: 06/06/2014

**PROCESSING DEPARTMENT:**

Department: CAO/Parks  
Dept. Contact: Vickie  
Phone #: 7538  
Department  
Head Signature: 

**CONTRACTOR:**

Name: Los Rios Community College  
Address: 6699 Campus Drive  
Placerville, CA 95667  
Phone: 642-5624

**CONTRACTING DEPARTMENT:** CAO/Parks Division


Service Requested: Review Service Agreement

Contract Term: 7/1-2014-11/30/2014 Contract/Amendment Value: \$2,000.00

Compliance with Human Resources requirements? Yes:  No:

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

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

Approved:  Disapproved:  Date: 6/12/14 By: D. Livingston   
Approved:  Disapproved:  Date: \_\_\_\_\_ By: \_\_\_\_\_

NOTE: Non-Standard Agreement

EL DORADO COUNTY COUNSEL  
2014 JUN -3 AM 8:57  
EL DORADO COUNTY COUNSEL  
2014 JUN 10 PM 3:36

**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: \_\_\_\_\_