CONTRACT ROUTING SHEET

Date Prepared:	6-18-13	Need Date:	
PROCESSING D Department: Dept. Contact: Phone #: Department Head Signature:	EPARTMENT: Sheriff Capt. Randy Peshon X4706 2 2/19/1	Address: 1 College South La Phone: 530-541-	ke Tahoe CA 96150
Contract Term:	d: Culinary Arts instruction for to years Human Resources requirements?	Contract Value: \$2.50/ hr/inmate	530-541-4660 X214 No:
Approved: Approved: This MOU is prop	minty entry of Solon	Date: 10/1//3 Date: for inmate Culinary Arts in	g to Community What requires Dish
	TO RISK MANAGEMENT. THANKS! ENT: (All contracts and MOU's e Disapproved: Disapproved: Nothing for Risk	Date:	nding agreements) By: By:
OTHER APPROV Departments: Approved: Approved:	AL: (Specify department(s) particular department (s) particular depart	cipating or directly affecte Date: Date:	By: