

CONTRACT ROUTING SHEET

Date Prepared: 4-28-2010

Need Date: ASAP

PROCESSING DEPARTMENT:

Department: Sheriff OES

CONTRACTOR:

Name: CA Dept of Boating & Waterways Grant

Dept. Contact: Kelly Webb

Address: _____

Phone #: 621-6565

Phone: _____

Department _____

Head Signature: _____

CONTRACTING DEPARTMENT:

Service Requested: Approval to sign Grant Agreement

Contract Term: 7-1-2010 thru 6-30-2011 Contract Value: \$319,546

Compliance with Human Resources requirements? Yes: N/A No: _____

Compliance verified by: _____

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

Approved: Disapproved: _____ Date: 4/29/10 By: [Signature]

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

EL DORADO COUNTY COUNSEL
2010 APR 29 AM 8:32

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: Disapproved: _____ Date: 5/5/10 By: [Signature]

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

RISK MANAGEMENT DEPT
MAY 4 AM 2:07

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

Departments: _____

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

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