CONTRACT ROUTING SHEET

Date Prepared:	04/06/15	Need Date:	04/08/15
PROCESSING DI	EPARTMENT:	CONTRACTO	R·
Department:	Board of Supervisors	Name: EI	O – Resolution to consolidate O Board elections
Dept. Contact:	Jim Mitrisin	Address:	Dourd Clockeric
Phone #:	X5592		
Department		Phone:	
Head Signature:			
CONTRACTING DEPARTMENT: Board of Supervisors Service Requested: Review the BOS Resolution Contract Term: Contract Value: \$0.00			
The state of the s	Human Resources requirements ed by:		No:
COUNTY COUNS Approved: Approved:	EL: (Must approve all contracts Disapproved: Disapproved:	s and MOU's) _ Date: 4/9//5 _ Date:	By: Pola
			2015 APR -8 AM 8: 6
	TO RISK MANAGEMENT. THANKS		OSEL
Approved:	ENT: (All contracts and MOU's Disapproved:	Date:	By:
Approved:	Disapproved:	Date:	By:
OTHER APPROV	AL: (Specify department(s) par	ticipating or directly a	ffected by this contract).
Approved:	Disapproved:	Date:	By:
Approved:	Disapproved:	Date:	By: