


Contract #: Resolution
Index Code: 403210

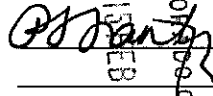
CONTRACT ROUTING SHEET

Date Prepared: 02-09-2015 Need Date: 03-03-2015

PROCESSING DEPARTMENT:
Department: HHSA/Public Health
Dept. Contact: Zhana Mc Cullough
Phone #: Ext. 7154
Department
Head Signature: 
Don Ashton, M.P.A., Director


CONTRACTOR:
Name: CalRecycle
Address: 1001 "I" Street
Sacramento, CA 95812
Phone: _____

CONTRACTING DEPARTMENT: Health and Human Services Agency
Service Requested: Resolution required by CalRecycle in order for HHSA to apply for and administer grants from CalRecycle.
Contract Term: FY 2015-2016 – FY 2019-2020 Contract/Grant Value: Approx. \$18,500/year
Compliance with Human Resources requirements? N/A X Yes _____ No: _____
Compliance verified by: Funding

COUNTY COUNSEL: (Must approve all contracts and MOU's)
Approved: X Disapproved: _____ Date: 2/23/15 By: 
Approved: _____ Disapproved: _____ Date: _____ By: _____

EL DORADO COUNTY COUNSEL
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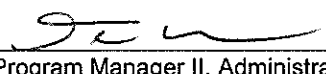
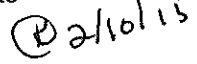
PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)
Approved: _____ Disapproved: _____ Date: 2/24/15 By: 
Approved: _____ Disapproved: _____ Date: _____ By: _____
nothing for Risk

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).
NOTE: Any contract that involves the development, installation, implementation, storing, retrieving, transfer, or sending of electronic information, the acquisition of software or computer related items, or any other service/item that may be IT related, especially those that involve computers and telecommunications, must be approved by IT before submission to Counsel. This also applies to any other contract that requires approval from another department.

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

IS FEE...
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 CFO Review Date: 2/17/15
 Program Manager II, Administration and Contracts Date: 2/17/15
 2/16/15