

CONTRACT ROUTING SHEET

Date Prepared: 6/23/2017

Need Date: 7/7/2017

PROCESSING DEPARTMENT:

Department: Library

Dept. Contact: Jeanne Amos

Phone #: X5546

Department

Head Signature: 

CONTRACTOR:

Name: _____

Address: _____

Phone: _____

CONTRACTING DEPARTMENT: Library

Service Requested: Resolution

Contract Term: _____ Contract Value: \$0.00

Compliance with Human Resources requirements? Yes: _____ No: _____

Compliance verified by: _____

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

Approved: ✓ Disapproved: _____ Date: 6/28/17 By: JDS

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

EL DORADO COUNTY COUNSEL
2017 JUN 23 PM 3:02

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: _____ Disapproved: _____ Date: 6-29-17 By: NS

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

waiting for Risk

PH2124 HR/RM JUN 25 '17

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

Departments: _____

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

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