

CONTRACT ROUTING SHEET

Date Prepared: 6/13/08

Need Date: 6/13/08

PROCESSING DEPARTMENT:

Department: Human Resources
Dept. Contact: D. Kal
Phone #: (530) 621-5573
Department
Head Signature: D. Kal for Ted Cwiek

CONTRACTOR:

Name: Ted Cwiek
Address: 330 Fair Lane, Bld A
Placerville, CA 95667
Phone: (530) 621-5572

CONTRACTING DEPARTMENT:

Service Requested: Human Resources
Negotiated MOU with EDCMA as authorized by Board
Contract Term: 2008 Contract Value: \$0.00 Status Quo
Compliance with Human Resources requirements? Yes: No:
Compliance verified by: Ted Cwiek

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

Approved: Disapproved: Date: 6/13 By: [Signature]
Approved: Disapproved: Date: By:

As to legal form. See concerns expressed in 6/13/08 memo.

ASSIGNMENT
DATE 6-13-08
ATTORNEY [Signature]
INDEX NO. 081000
CIR

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: Disapproved: Date: 6/12/08 By: [Signature]
Approved: Disapproved: Date: By:

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

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