

# CONTRACT ROUTING SHEET

Date Prepared: 1/27/11

Need Date: 2/10/11

**PROCESSING DEPARTMENT:**

Department: Human Services  
Dept. Contact: Amy Higdon  
Phone #: x4836  
Department Head Signature: *Daniel Nielson*  
Daniel Nielson, Director

**CONTRACTOR:**

Name: TransUnion, LLC  
Address: 555 W. Adams Street  
Chicago, IL 60661  
Phone: 800-882-8105

EL DORADO COUNTY COUNSEL  
2011 JAN 28 AM 10:49

**CONTRACTING DEPARTMENT:** Human Services

Service Requested: Credit score and reporting services.  
Contract Term: 10/28/08-Ongoing Contract Value: annual est. \$1,000  
Compliance with Human Resources requirements? Yes: N/A No: \_\_\_\_\_  
Compliance verified by: \_\_\_\_\_

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

Approved: ✓ Disapproved: \_\_\_\_\_ Date: 1-28-11 By: *[Signature]*  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

EL DORADO COUNTY COUNSEL  
2011 FEB 1 AM 8:31

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

Approved: ✓ Disapproved: \_\_\_\_\_ Date: 2/1/11 By: *[Signature]*  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

Please contact Amy Higdon at x4836 to pick up. Thanks!

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

Departments: \_\_\_\_\_  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_