

# CONTRACT ROUTING SHEET

Date Prepared: 4/3/17

Need Date: ASAP

**PROCESSING DEPARTMENT:**

Department: Sheriff's Office  
Dept. Contact: Kelley Golden  
Phone #: 530-621-5657  
Department Head Signature: Jon DeV... *4/3/17*

**CONTRACTOR:**

Name: Partners for a Safer America  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

**CONTRACTING DEPARTMENT:** Sheriff's Office

Service Requested: Advertising of law related information and referral services at Jails  
Contract Term: 05/11/17 - 05/10/20 Contract Value: \$0.00  
Compliance with Human Resources requirements? Yes: x No: \_\_\_\_\_  
Compliance verified by: Misty Garcia- Sr. Human Resources Analyst

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

Approved: ✓ Disapproved: \_\_\_\_\_ Date: 4/4/17 By: [Signature]  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

EL DORADO COUNTY COUNSEL  
2017 APR 4 AM 8:09

~~PLEASE FORWARD TO RISK MANAGEMENT. THANKS!~~

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

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