

AGREEMENT CONTRACT ROUTING SHEET

Date Prepared: 06/24/2024

Need Date: 07/05/2024

PROCESSING DEPARTMENT:

Department: Chief Administrative Office
Dept. Contact: Grant Webber
Phone: 530-621-6768
Department Head Signature: *Sue Hennike*
[Sue Hennike \(Jun 25, 2024 12:19 PDT\)](#)

CONTRACTOR:

Name: N/A
Address: _____
Phone: _____
Org Code: 0200000
Project # _____
(if applicable): _____
Funding Source: N/A

CONTRACTING DEPARTMENT: N/A

Service Requested: Review changes made to Policy D-5

Description: Board of Supervisors Policy D-5 - Food Purchases

Contract Term: N/A Contract Value: \$0.00

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

Approved: Disapproved: Date: 7/2/24 By: *Deey*
Approved: Disapproved: Date: _____ By: _____

HR APPROVAL: WILL BE REVIEWED THROUGH WORKFLOW

RISK MANAGEMENT: WILL BE REVIEWED THROUGH WORKFLOW

PLEASE EMAIL SIGNED DOCUMENT TO: grant.webber@edcgov.us

Thank you!







Policy D-5 Review - Blue Route

Final Audit Report

2024-06-25

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