

# ROUTING SHEET

RECEIVED

OCT 19 2006

*Revised Received*  
El Dorado County Counsel

Date Prepared: 10/18/2006

Need Date: 10/24/06

### PROCESSING DEPARTMENT:

Department: Agriculture, Weights & Measures

Dept. Contact: Myrna Tow

Phone #: X6647

Department \_\_\_\_\_

Head Signature: *[Signature]*

### CONTRACTOR:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

### REQUESTING DEPARTMENT:

Agriculture, Weights & Measures Fee Schedule

Service Requested: Review new Fee Schedule, combining three current resolutions into one

Contract Term: 11/7/06- until revised Contract/Amendment Value: \_\_\_\_\_

Compliance with Human Resources requirements? Yes:  No:

Compliance verified by: \_\_\_\_\_

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

Approved:  Disapproved:  Date: 11/2/06 By: *[Signature]*

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

ASSIGNMENT

DATE: 10/23/2006  
ATTORNEY: Paula A  
DEPT. INDEX NO.: 261000  
BY: *[Signature]*

### 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: \_\_\_\_\_