

# CONTRACT ROUTING SHEET

Date Prepared: 5/7/15

Need Date: 5/11/15

### PROCESSING DEPARTMENT:

Department: Human Resources  
Dept. Contact: Judie Engel  
Phone #: X5531  
Department \_\_\_\_\_  
Head Signature: \_\_\_\_\_

### CONTRACTOR:

Name: Judith Kerr, County Counsel  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

### CONTRACTING DEPARTMENT:

Service Requested: Review of EDC Records Retention/Disposition Schedule, which is going to the BOS for approval ~~6/2/15~~ 7/14/15.

Contract Term: \_\_\_\_\_ Contract Value: NA  
Compliance with Human Resources requirements? Yes: X No: \_\_\_\_\_  
Compliance verified by: Bobbi Bennett

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

Approved: ✓ Disapproved: \_\_\_\_\_ Date: 6/18/15 By: Judith Kerr  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

6/18/15 Continuing to wait for replacement of page 1 that conforms to city statute related to cities and not county TC to J. Engle for replacement as discussed previously by

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

Approved: ✓ Disapproved: \_\_\_\_\_ Date: 6/19/15 By: Jasmin Hunt  
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: \_\_\_\_\_