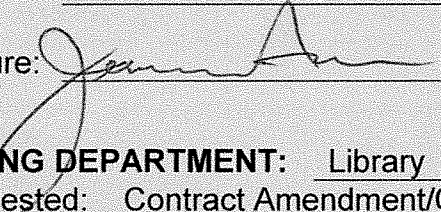


# CONTRACT ROUTING SHEET

Date Prepared: 9/19/2018

Need Date: 10/12/2018

**PROCESSING DEPARTMENT:**

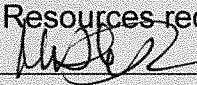
Department: Library  
Dept. Contact: Jeanne Amos  
Phone #: X5546  
Department  
Head Signature: 

**CONTRACTOR:**

Name: SirsiDynix  
Address: 3300 N. Ashton Blvd, Suite 500  
Lehi, UT 84043  
Phone: 800-288-8020

**CONTRACTING DEPARTMENT:** Library

Service Requested: Contract Amendment/Change Order  
Contract Term: 5-Year Contract ends 12/31/2018 Contract Value: \$60,800

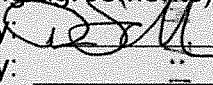
Compliance with Human Resources requirements? Yes:  No:   
Compliance verified by:  9-25-18

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

Approved: as to form Disapproved: \_\_\_\_\_ Date: 9/24/18 By: JDS  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved:  Disapproved: \_\_\_\_\_ Date: 9/25/18 By:   
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

EL DORADO COUNTY COUNSEL  
2018 SEP 20 11:47

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

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