

CONTRACT ROUTING SHEET

Date Prepared: 9/2/12

Need Date: ASAP

PROCESSING DEPARTMENT:

Department: Economic Development
Dept. Contact: Jim Claybaugh
Phone #: 621-7539
Department
Head Signature: [Signature]

CONTRACTOR:

Name: Tahoe Fund
Address: P.O. Box 7124
Tahoe City, CA 96154
Phone: 775-298-0035

CONTRACTING DEPARTMENT: CAO – Economic Development

Service Requested: Review Funding Resolution
Contract Term: N/A Contract Value: \$ 1,000.00
Compliance with Human Resources requirements? Yes: No:
Compliance verified by:

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

Approved: ✓ Disapproved: Date: 9/4/2014 By: J. Sun
Approved: Disapproved: Date: By:

EL DORADO COUNTY COUNSEL
10/14 SEP -2 PM 2:50

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: ✓ Disapproved: Date: 9/15/14 By: [Signature]
Approved: Disapproved: Date: By:

RISK MANAGEMENT
1/4 SEP -5 PM 2:02

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

Departments:
Approved: Disapproved: Date: By:
Approved: Disapproved: Date: By: