

NEW RESOLUTION CONTRACT ROUTING SHEET

Date Prepared: 11/22/2019

Need Date: 12/2/2019

PROCESSING DEPARTMENT:

Department: BOS
Dept. Contact: Kim Dawson
Phone: 5393
Department:
Head Signature: [Signature]

CONTRACTOR:

Name: _____
Address: _____
Phone: _____
Org Code: _____

CONTRACTING DEPARTMENT:

Service Requested: Review Resolution
Contract Term: _____ Contract Value: _____

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

Approved: X Disapproved: _____ Date: 11/26/19 By: [Signature]
Approved: _____ Disapproved: _____ Date: _____ By: _____

EDC Commission for Youth and Families. Paula has reviewed Resolution.

HR APPROVAL: WILL BE REVIEWED THROUGH WORKFLOW

RISK MANAGEMENT: WILL BE REVIEWED THROUGH WORKFLOW

5393
PLEASE CALL x _____ FOR PICK-UP... THANKS!