

NEW AGREEMENT CONTRACT ROUTING SHEET

Date Prepared: 12/17/18

Need Date: 12/20/18

PROCESSING DEPARTMENT:

Department: Health and Human Svcs

Dept. Contact: Kathryn Deffebach

Phone: X7147

Department _____

Head Signature: 

CONTRACTOR:

Name: N/A

Address: _____

Phone: _____

Org Code: _____

CONTRACTING DEPARTMENT:

Service Requested: Update and revision of Co Ordinance Sections: 2.20.510 – 2.20.570

Contract Term: N/A Contract Value: N/A

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

Approved: X Disapproved: _____ Date: 12/18/18 By: 

Approved: _____ Disapproved: _____ Date: _____ By: _____

EL DORADO COUNTY COUNSEL
2018 DEC 17 PM 2:10

HR APPROVAL: WILL BE REVIEWED THROUGH WORKFLOW

RISK MANAGEMENT: WILL BE REVIEWED THROUGH WORKFLOW

PLEASE CALL x7147 FOR PICK-UP...THANKS!