

CONTRACT ROUTING SHEET

Date Prepared: 9/28/07

Need Date: 10/10/07

PROCESSING DEPARTMENT:

Department: General Services
Dept. Contact: Deb Lane
Phone #: 5933
Department Head Signature: [Signature]
George Sanders, Deputy Director

CONTRACTOR:

Name: Wilkinson Revocable Trust
Address: P.O. Box 992
Placerville, CA 95667
Phone: (530) 626-3406

[Signature]
EL DORADO COUNTY COUNSEL
2007 NOV 26 PM 5:41

CONTRACTING DEPARTMENT: Department Human Services

Service Requested: Lease Agreement #279-L0811
Contract Term: Nov. 1, 2007 - Oct. 31, 2012 Contract/Amendment Value: _____
Compliance with Human Resources requirements? Yes: _____ No: _____
Compliance verified by: _____

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

Approved: [Signature] Disapproved: _____ Date: 10-8-07 By: [Signature]
Approved: [Signature] Disapproved: _____ Date: 11-27-07 By: [Signature]

ASSIGNMENT
DATE 10/08/07
ATTORNEY RENNETT
DEPT INDEX NO. 1417200
BY: [Signature]

11/26/07 - REV FORM + PAYMENT LANGUAGE TO FED 1ST AND
REQMT FOR COMPLETION OF TENANT IMPRVS.

[Signature]
EL DORADO COUNTY COUNSEL
2007 OCT -11 PM 3:27

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: [Signature] Disapproved: _____ Date: 10/10/07 By: [Signature]
Approved: _____ Disapproved: _____ Date: _____ By: _____

RECEIVED
HUMAN RESOURCES DEPT
07 OCT 10 AM 7:56

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

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