

Legistar No.: 21-0789

Resolution No.: _____

RESOLUTION ROUTING SHEET

Date Prepared: 5/4/21

Need Date: 6/4/21

PROCESSING DEPARTMENT:

Department: CAO: EMS / Preparedness

Contact Name: Jeremy Apodaca

Phone: x5838

Email Address: jeremy.apodaca@edcgov.us

Department Head Signature: _____

Requesting Department: Sue Hennike

Org Code: 1230200

Service Requested: Resolution Review

Description:
Resolution to amend current Resolutions 186-2015 and 187-2015 (adoption of ambulance services rate schedules) to substitute CAO for HHSA as department responsible for billing and collecting ambulance services.

COUNTY COUNSEL:

Approved: Disapproved: Date: _____

County Counsel Signature: Kathleen

 Digitally signed by Kathleen
Date: 2021.06.11 15:13:07 -07'00'

County Counsel Comments:

HR APPROVAL: N/A (Resolution)

RISK MANAGEMENT: N/A (Resolution)

PLEASE EMAIL CHANGES/APPROVAL TO DEPARTMENT CONTACT