CONTRACT ROUTING SHEET

Date Prepared:	12/4/2017	Need Date:	12/8/2017
PROCESSING DI Department:	EPARTMENT: Library	CONTRACTOR Name:	:
Dept. Contact: Phone #:	Jeanne Amos X5546	Address:	
Department Head Signature:	Januar	Phone:	
CONTRACTING	DEPARTMENT: Library		
Service Requeste	d: Review Revised County Poli	icy F-8 – Display Case	es
Contract Term: _		Contract Value:	\$0.00
Compliance with I Compliance verific	Human Resources requirements? ed by:	? Yes:	No:
	SEL: (Must approve all contracts		2
Approved:	Disapproved: Disapproved:	Date: 1/8/2018	By: Job By:
Approved.	Disappioved.	Date.	Бу.
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	TO RISK MANAGEMENT. THANKS! ENT: (All contracts and MOU's e	except boilerplate gra	nt funding agreements
Approved:	Disapproved:	Date:	By: <u>£</u>
Approved:	Disapproved:	Date:	By:
OTHER APPROV Departments:	AL: (Specify department(s) part	icipating or directly aff	fected by this contract).
Approved:	Disapproved:	Date:	By:
Approved:	Disapproved:	Date:	By: