

CONTRACT ROUTING SHEET

Date Prepared: 4/15/11

Need Date: _____

PROCESSING DEPARTMENT:

Department: CAO
Dept. Contact: Sue Hennike
Phone #: 5577
Department
Head Signature: Bonnie L. Rich
for Sue

CONTRACTOR:

Name: EDC Chamber of Commerce
Address: 542 Main Street
Placerville, CA 95667
Phone: _____

CONTRACTING DEPARTMENT: CAO

Service Requested: Promotions

Contract Term: 3 years Amendment Value: \$15,000.00

Compliance with Human Resources requirements? Yes: _____ No: _____

Compliance verified by: _____

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

Approved: Disapproved: _____ Date: 4-15-11 By: [Signature]
Approved: _____ Disapproved: _____ Date: _____ By: _____

2011 APR 15 PM 4:10
CL DORRIS COUNTY COUNSEL

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

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

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

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