

CONTRACT ROUTING SHEET

Date Prepared: February 5, 2018

Need Date: March 1, 2018

PROCESSING DEPARTMENT:

Department: Library

Dept. Contact: Jeanne Amos

Phone #: X5546

Department

Head Signature: 

CONTRACTOR:

Name: Friends of the Library of El Dorado County, Inc.

Address: 345 Fair Lane
Placerville, CA 95667

Phone: _____

CONTRACTING DEPARTMENT: Library

Service Requested: Review

Contract Term: _____ Contract Value: \$0.00

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

Compliance verified by: _____

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

Approved: Disapproved: _____ Date: 3/15/2018 By: JAS

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

see email for changes/edits.

EL DORADO COUNTY COUNSEL
FEB -5 PM 3:13

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: Disapproved: _____ Date: 15 Mar 2018 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: _____