

Agreement # Reso

Registrar # \_\_\_\_\_

# AGREEMENT CONTRACT ROUTING SHEET

Date Prepared: 10/26/2023

Need Date: 11/08/2023

### PROCESSING DEPARTMENT:

Department: SHERIFF

Dept. Contact: TANIA DONNELLY

Phone: 530-621-6636

Department Head Signature: Monica Ferguson  
Digitally signed by Monica Ferguson  
Date: 2023.10.25 10:27:34 -0700'

### CONTRACTOR:

Name: STORM DISASTER TERMINATION

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Org Code: \_\_\_\_\_

Project # \_\_\_\_\_

(if applicable): \_\_\_\_\_

Funding Source: 2420

### CONTRACTING DEPARTMENT: SHERIFF

Service Requested: REVIEW AND APPROVE

Description: RESOLUTION ENDING LOCAL STORM DISASTER

Contract Term: N/A Contract Value: \$ 0.00

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

Approved:  Disapproved:  Date: 10/30/2023 By: Stephen Mansell  
Digitally signed by Stephen Mansell  
Date: 2023.10.20 15:22:56 -0700'

Approved:  Disapproved:  Date: \_\_\_\_\_ By: \_\_\_\_\_

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HR APPROVAL: WILL BE REVIEWED THROUGH WORKFLOW

RISK MANAGEMENT: WILL BE REVIEWED THROUGH WORKFLOW

PLEASE EMAIL FOR PICK-UP [cao-contracts-newrequests@edcgov.us](mailto:cao-contracts-newrequests@edcgov.us) Thank you!