Agenda Date:	Due to CAO:	Due to BOS:	Contract #:
			Amendment:
	CONTRAC	T ROUTING	G SHEET #14-0588
PROCESSING D	EPARTMENT:	CONTRAC	TOR:
Department:		Name:	Palos Verdes Properties
Dept. Contact:		Address:	4330 Golden Center Dr # D
Phone #:	5345	Addices.	Placerville, CA 95667
Department Hea		Phone #:	(530) 622-5682
Signature:		riione #.	(330) 022-3082
	5369		
	DEPARTMENT: Community		
	h Human Resources require	ments? Yes: _	No:X
Compliance ver			
NOTE TO) HR:		
NOTE TO	COUNTY COUNSEL:		
HOILIC	7 000N11 000N0LL		<u> </u>
			20.00
	SEL: (Must approve all conf		S A N
Approved:	Disapproved:	Date: 0	24/15 By: D. LIVITUROS
Approved:	Disapproved:	Date:	By:
			I P?
* Sua	TECT TO PEVISIONS T	TRANSMITTEN TO	O A. MOUNT. GO &
	5 Revisions M		A. Mount. 6
	-11-101-91019	and the	
			4. C. Schmollinger
NOTE TO	O RISK MANAGEMENT:		
RISK MANAGEI	MENT: (All contracts and M(Oll's except boiler	rplate grant funding agreements)
Approved:	Disapproved:	Date: 918	
Approved:	Disapproved:	Date:	By:
Approvou.		na for RISK	y . () on ()
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		U	من دو
			U Single
			o C
			0 0
	VAL (Specify department(s)	participating or d	lirectly affected by this contract)
Department(s):	NA		
Approved:	Disapproved:	Date:	By:
Approved:	Disapproved:	Date:	By:
		Approximation of the second	