

CONTRACT ROUTING SHEET

Date Prepared: 9-8-14

Need Date: _____

PROCESSING DEPARTMENT:

Department: CAO

Dept. Contact: Sue Hennike

Phone #: 5577

Department Authorization: 

CONTRACTOR:

Name: EDC Chamber of Commerce
Visitors Authority

Address: 542 Main Street
Placerville, CA 95667

Phone: _____

CONTRACTING DEPARTMENT: Economic Development

Service Requested: Promotions Services

Contract Term: 5 years

Amendment Value: \$ ~~1,177,500~~ 254,380.41

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

Compliance verified by: _____

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

Approved: ✓ Disapproved: _____ Date: 9/12/2014 By: J. San Pedro

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

2014 SEP 10 AM 8:12
DORADO COUNTY COUNSEL

RISK MANAGEMENT:

Approved: ✓ Disapproved: _____ Date: 9/16/14 By: Czy

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

Current Workers Comp requested at

14 SEP 15 PM 2:58
HUMAN RESOURCES DEPT.
RECEIVED