## RESOLUTION ROUTING SHEET

Date Prepared: 10 3 19 Need Date:	10/9/19
PROCESSING DEPARTMENT:	
Department: Human Resources	
Dept. Contact Name: MISM Garaia Phor Department Head Signature:	ne: <u>\$398</u>
Requesting Department: <u>Human Pesonrus</u> Org	Code:
Service Requested: Resolution Review	
Description: Corrections unit - 0e3 Succes	sor mon.
COUNTY COUNSEL:  Approved: Disapproved: Date: 10/3	3/19 By: Lyley 1. May
County Counsel Comments:	OCT 03 2019  4:05pm/m Ky

HR APPROVAL: N/A (Resolution) RISK MANAGEMENT: N/A (Resolution)