

CONTRACT ROUTING SHEET

Date Prepared: 7/25/12

Need Date: 8/9/12

PROCESSING DEPARTMENT:

Department: HHS
Dept. Contact: Ren Scammon
Phone #: Ext. 4852
Department
Head Signature: [Signature]

CONTRACTOR:

Name: _____
Address: _____
Phone: _____

CONTRACTING DEPARTMENT:

Service Requested: Board Resolution
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: _____ By: _____
Approved: X Disapproved: _____ Date: 8/6/12 By: [Signature]

Resolution to assign County's private activity bond allocation to the California Rural Mortgage Finance Authority Homebuyers Fund in order to continue participation in the Mortgage Credit Certificate Program.

Please incorporate proposed revision

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

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

PLEASE CALL C.J. FREELAND AT EXT. 4863 WHEN READY FOR PICK UP

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).

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