

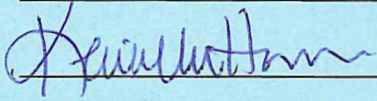
Contract #: D119001

CONTRACT ROUTING SHEET

Date Prepared: 08/08/18

Need Date: 8/17/18

PROCESSING DEPARTMENT:

Department: District Attorney
Dept. Contact: Megan Arevalo *WA*
Phone #: 621-5147
Department
Head Signature: 

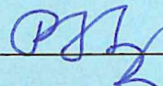
CONTRACTOR:

Name: Office of Traffic Safety
Address: 2208 Kausen Dr, Ste 300
Elk Grove, CA 95758
Phone: 916-509-3030

CONTRACTING DEPARTMENT: District Attorney

Service Requested: Review Grant Agreement
Contract Term: 10/1/18 - 9/30/19 Contract Value: \$200,978
Compliance with Human Resources requirements? Yes: _____ No: _____
Compliance verified by: _____


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

Approved: X Disapproved: _____ Date: 8/9/18 By: 
Approved: _____ Disapproved: _____ Date: _____ By: _____

EL DORADO COUNTY COUNSEL
2018 AUG -9 AM 10:56

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: ✓ Disapproved: _____ Date: 8/10/18 By: 
Approved: _____ Disapproved: _____ Date: _____ By: _____

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

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