

# CONTRACT ROUTING SHEET

Date Prepared: 11/04/10

Need Date: 11/15/10

**PROCESSING DEPARTMENT:**

Department: Human Services  
 Dept. Contact: Ren Scammon  
 Phone #: Ext. 4852  
 Department: HCED Programs  
 Head Signature: Daniel Nielson  
 Daniel Nielson, M.P.A.,  
 Director

**CONTRACTOR:**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_

RECEIVED  
 HUMAN RESOURCES DEPT  
 10 NOV - 9 PM 3:48

**CONTRACTING DEPARTMENT:** HUMAN SERVICES

Service Requested: Resolution Review and Approval

Contract Term: \_\_\_\_\_ Contract Value: \$0.00

Compliance with Human Resources requirements? Yes: N/A No: \_\_\_\_\_

Compliance verified by: \_\_\_\_\_

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

Approved: ✓ Disapproved: \_\_\_\_\_ Date: 11-9-10 By: [Signature]  
 Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

Resolution authorizing a change in criteria for program implementation under open FY 2008-09  
 Community Development Block Grant (CDBG) Enterprise Component Grant #08-EDEF-5877.

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: ✓ Disapproved: \_\_\_\_\_ Date: 11/10/10 By: [Signature]  
 Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

EL PASO COUNTY COUNSEL  
 2010 NOV - 8 PM 2:09

Please call Yvette Wencke at Human Services for pick up — ext. 4864

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

Departments: \_\_\_\_\_  
 Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_  
 Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_