

Contract #: Template
Index Code: 450000

CONTRACT ROUTING SHEET

Date Prepared: 2/2/15

Need Date: 2/6/15

PROCESSING DEPARTMENT:

Department: HHSA/Administration
Dept. Contact: Kathryn Lang
Phone #: X7147
Department: _____
Head Signature: 
Don Ashton, M.P.A., Director

CONTRACTOR:

Name: Template for Resolution
Address: to add new classifications
Phone: _____

CONTRACTING DEPARTMENT: HHSA/Administration

Service Requested: Template resolution to add new classifications to HHSA personnel
Contract Term: N/A Contract/Grant Value: N/A
Compliance with Human Resources requirements? Yes No
Compliance verified by: _____

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

Approved: Disapproved: _____ Date: 2/3/15 By: 
Approved: _____ Disapproved: _____ Date: _____ By: _____

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

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

Approved: _____ Disapproved: _____ Date: 2/4/15 By: 
Approved: _____ Disapproved: _____ Date: _____ By: _____
Nothing for Risk

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

NOTE: Any contract that involves the development, installation, implementation, storing, retrieving, transfer, or sending of electronic information, the acquisition of software or computer related items, or any other service/item that may be IT related, especially those that involve computers and telecommunications, must be approved by IT before submission to Counsel. This also applies to any other contract that requires approval from another department.

Departments: _____

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

CFO Review _____ Date _____

 2/2/15
Program Manager II, Administration and Contracts Date