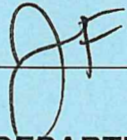


CONTRACT ROUTING SHEET

Date Prepared: 1/28/19

Need Date: 1/30/19

PROCESSING DEPARTMENT:

Department: CAO
Dept. Contact: Jennifer Franich
Phone #: x7539
Department
Head Signature: 

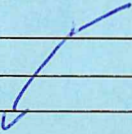
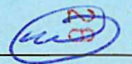
CONTRACTOR:

Name: n/a
Address: _____
Phone: _____

CONTRACTING DEPARTMENT: CAO

Service Requested: Review CSAC EIA agreement for services
Contract Term: n/a Contract Value: n/a
Compliance with Human Resources requirements? Yes: n/a No: n/a
Compliance verified by: n/a

COUNTY COUNSEL: (Must approve all contracts and MOUs)

Approved:  Disapproved: _____ Date: 1/30/19 By: 
Approved: _____ Disapproved: _____ Date: _____ By: _____

Conditioned -> see notes

EL DORADO COUNTY COUNSEL
2019 JAN 28 PM 12:58

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: _____

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

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