

# CONTRACT ROUTING SHEET

Date Prepared: 10/15/2018

Need Date: 10/25/2018

**PROCESSING DEPARTMENT:**

Department: Library  
Dept. Contact: Jeanne Amos  
Phone #: X5546

Department Head Signature: 

**CONTRACTOR:**

Name: First 5 El Dorado  
Address: 2776 Ray Lawyer Drive  
Placerville, CA 95667  
Phone: 530 622-5787

**CONTRACTING DEPARTMENT:** Library

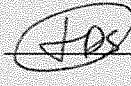
Service Requested: Amendment 2 to 071-F1711

Contract Term: 1/1/2016 – 6/30/2021 Contract Value: \$0.00

Compliance with Human Resources requirements? Yes: \_\_\_\_\_ No: \_\_\_\_\_

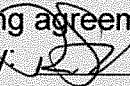
Compliance verified by: \_\_\_\_\_

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

Approved:  Disapproved: \_\_\_\_\_ Date: 10/16/18 By:   
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved:  Disapproved: \_\_\_\_\_ Date: 10/17/18 By:   
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

EL DORADO COUNTY COUNSEL  
2018 OCT 15 AM 7:31

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

Departments: \_\_\_\_\_

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