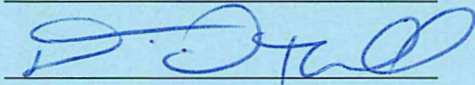


# CONTRACT ROUTING SHEET

Date Prepared: 10/9/17

Need Date: ASAP—BOS 11/7/17

**PROCESSING DEPARTMENT:**

Department: Information Technologies  
Dept. Contact: David Russell/Mollie Purcell  
Phone #: X5106  
Department  
Head Signature: 

**CONTRACTOR:**

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

**CONTRACTING DEPARTMENT:** N/A

Service Requested: Review IT Policy Edits—A-22 County Website Policy  
Contract Term: \_\_\_\_\_ 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: 10/18/17 By: fps  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

*See comments.*  
*Changes incorporated mfp 10/26/17*

EL DORADO COUNTY COUNSEL  
2017 OCT 10 PM 12:40

PLEASE FORWARD TO RISK MANAGEMENT. THANKS! *CALL MOLLY PURCELL X5106 FOR P/U.*

**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: Human Resources  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_



# CONTRACT ROUTING SHEET

Date Prepared: 10/9/17

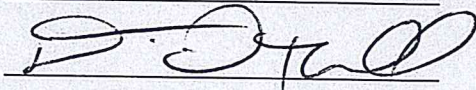
Need Date: ASAP—BOS 11/7/17

### PROCESSING DEPARTMENT:

Department: Information Technologies

Dept. Contact: David Russell/Mollie Purcell

Phone #: X5106

Department Head Signature: 

### CONTRACTOR:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

### CONTRACTING DEPARTMENT: N/A

Service Requested: Review IT Policy Edits—A-22 County Website Policy

Contract Term: \_\_\_\_\_ 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: \_\_\_\_\_ By: \_\_\_\_\_

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

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PLEASE FORWARD TO RISK MANAGEMENT. THANKS! CALL MOLLYE PURCELL X5106 FOR P/U.

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

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

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

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

Departments: Human Resources

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

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

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PM 12:33 HR/PA OCT 10 '17