

CONTRACT ROUTING SHEET

Date Prepared: 11/14/12

Need Date: As Soon As Possible

PROCESSING DEPARTMENT:

Department: Treasurer/Tax Collector
Dept. Contact: Todd Hall
Phone #: 5820
Department
Head Signature: *C.L. Rafferty*

CONTRACTOR:

Name: N/A
Address: N/A
Phone: N/A

CONTRACTING DEPARTMENT:

Service Requested: Please review attached Resolution
Contract Term: N/A Contract Value: \$0.00
Compliance with Human Resources requirements? Yes: No: XX
Compliance verified by: N/A

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

Approved: ✓ Disapproved: Date: 11/30/12 By: *[Signature]*
Approved: Disapproved: Date: By:

EL DORADO COUNTY COUNCIL
2012 NOV 30 AM 8:51

~~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: