

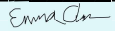
REVIEW AND APPROVAL REQUESTED FOR:

☒ Contract ☐ Amendment ☐ Resolution ☐ Ordinance ☐ Policy ☐ Other

**County Counsel
REVIEW ROUTING SHEET**

Date Prepared: 3/19/25Need Date: 4/15/25**PROCESSING DEPARTMENT**Department: CAO EMSOrg Code: 1210120Dept Contact: Emma OwensFunding Source: CSA 7 AmbulancePhone: 530-621-5122

PL String: _____

Dept. Signature:  Digitally signed by Emma Owens
Date: 2025.03.19 16:08:04 -07'00'

Legistar #: _____

Title: Principal Management Analyst**CONTRACT INFORMATION**CONTRACT #: TBDCONTRACT AMENDMENT #: TBDContracting Department: CAO EMSContractor/Vendor Name: El Dorado County Emergency Services AuthorityContract Term: 7/1/25 - 6/30/35 initial Contract Value: \$93,407,041.92*Note - HR & RISK review will take place during Fenix Contract workflow - amendments see below.***ORDINANCE/RESOLUTION/POLICY INFORMATION**

TITLE / SUBJECT: _____

NUMBER (If Assigned): _____

DESCRIPTION AND ADDITIONAL NOTES FOR COUNTY COUNSEL

Contract for EMS Prehospital Advanced Life Support, Ambulance, and Dispatch Services

COUNTY COUNSEL

Approved ☒ Disapproved ☐ Date: 5/20/25

Approved ☐ Disapproved ☐ Date: _____

By: Nicole C. Wright Digitally signed by Nicole C. Wright
Date: 2025.05.20 11:14:23 -07'00'

By: _____

COMMENTS**CONTRACT AMENDMENT ONLY****HR APPROVAL**Compliance with Human Resources requirements? Yes: ☐ No: ☐

Compliance verified by: _____

RISK APPROVAL

Approved ☐ Disapproved ☐ Date: _____ By: _____

Approved ☐ Disapproved ☐ Date: _____ By: _____

COMMENTS _____