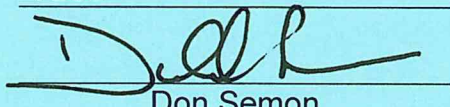


CONTRACT ROUTING SHEET

Date Prepared: 12/27/17

Need Date: Board Date 2/6/18

PROCESSING DEPARTMENT:

Department: Child Support Services
Dept. Contact: Ginger Harms
Phone #: 7238
Department Head Signature: 
Don Semon

CONTRACTOR:

Name: Department of Justice
Address: _____
Phone: _____

CONTRACTING DEPARTMENT: Child Support Services

Service Requested: Approval of Resolution
Contract Term: N/A Contract Value: None
Compliance with Human Resources requirements? Yes: _____ No: _____
Compliance verified by: _____

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

Approved: Disapproved: _____ Date: 1/3/18 By: PJ Santy
Approved: _____ Disapproved: _____ Date: _____ By: _____

Child Support Services desires to obtain a Criminal Offender Records Information (CORI) number to allow fingerprint results on potential and current employees to be sent directly to child support. Currently the results have to be sent to the DA's Office. DOJ requires a Board approved Resolution to accompany the application.

Note: The Board approved a similar Resolution for HSA in 2006 (copy attached for your reference)

2018 JAN -2 PM 05
DORADO COUNTY COUNSEL

Please contact Ginger Harms (ext. 7238) after County Counsel approval. No need to forward to any other Department.

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: _____