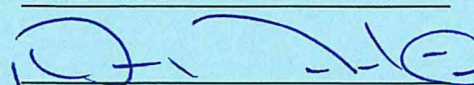


CONTRACT ROUTING SHEET

Date Prepared: 06/02/2015

Need Date: ASAP

PROCESSING DEPARTMENT:

Department: Probation
Dept. Contact: Darci Prall
Phone #: Ext. 6076
Department
Head Signature: 

CONTRACTOR:

Name: Julie Wyatt
Address: 5505 Rye Ct.
Rocklin, CA 95765
Phone: _____

CONTRACTING DEPARTMENT: Probation (*Administering for the CCP)

Service Requested: Fill the Analyst position for the Community Corrections Partnership
Contract Term: 3 years Contract Value: \$375,000.00
Compliance with Human Resources requirements? Yes: _____ No: _____
Compliance verified by: Policy C-17, Section 7.11 waiver attached

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

Approved: X Disapproved: _____ Date: 6/5/15 By: Prall
Approved: _____ Disapproved: _____ Date: _____ By: _____

RECEIVED

JUN 04 2015

El Dorado County Counsel

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: _____ Disapproved: X Date: 6/8/15 By: Prall
Approved: X Disapproved: _____ Date: 6/18/15 By: Prall

please Resubmit with insurance need at a minimum?

- 1) Auto liab (doesn't need \$1mil, just state complency)
- 2) Professional E & O
- 3) WC or WC waiver
- 4) if has an office - GL + AE & primary
if NO office may consider waiving

at high SS, up loaded iws. to EBIX 6/16/15

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

Departments: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____

Resubmitted 6/16/15

HUMAN RESOURCES DEPT.
RECEIVED
JUN 16 2015 11:23:37 AM