

# CONTRACT ROUTING SHEET

Date Prepared: 01-09-2015

Need Date: Please Rush

**PROCESSING DEPARTMENT:**

Department: HHSA  
Dept. Contact: Zhana Mc Cullough  
Phone #: 7154  
Department  
Head Signature:   
Don Ashton, M.P.A., Director

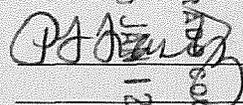
**CONTRACTOR:**

Name: Golden Sierra Job Training Agency  
Address: 1919 Grass Valley Hwy, Suite 100  
Auburn, CA 95603  
Phone: \_\_\_\_\_

**CONTRACTING DEPARTMENT:** HHSA/Community Services

Service Requested: 2014-2015 Funding Agreement for services at the One-Stop Connection  
Contract Term: 10/01/2014 - 05/31/16 Contract/Grant Value: \$698,526  
Compliance with Human Resources requirements? N/A X Yes \_\_\_\_\_ No: \_\_\_\_\_  
Compliance verified by: N/A - Incoming Funding

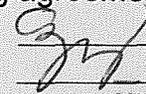
**COUNTY COUNSEL:** (Must approve all contracts and MOU's)

Approved: X Disapproved: \_\_\_\_\_ Date: 1/21/15 By:   
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

EL DORADO COUNTY COUNSEL  
2015 JAN 21 12 PM 2:04

**PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!**

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

Approved: X Disapproved: \_\_\_\_\_ Date: 1/21/15 By:   
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

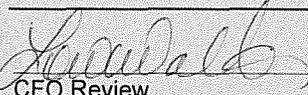
Please provide insurance documents. (See Exhibit F.)

*\* Ins. docs already sent to Golden Sierra in June/July 2014  
& new costs go out June/July 2015*

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

**NOTE:** Any contract that involves the development, installation, implementation, storing, retrieving, transfer, or sending of electronic information, the acquisition of software or computer related items, or any other service/item that may be IT related, especially those that involve computers and telecommunications, must be approved by IT before submission to Counsel. This also applies to any other contract that requires approval from another department.

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

 1/9/15  
CFO Review Date

 1/9/15  
Program Manager II, Administration and Contracts Date

1/8/15  
