CONTRACT ROUTING SHEET

Date Prepared:	11/1/2019	Need Date:	11/15/2019
PROCESSING D		CONTRACTO	
Department:	CAO Jennifer Franich / Emma	Name: <u>n/a</u> Address:	
Dept. Contact:	Owens	Address.	
Phone #:	x7539 / x5122		
Department	\cap \rightarrow \cap \wedge	Phone:	
Head Signature:	July de		
CONTRACTING DEPARTMENT: CAO			
Service Requested: Review Ordinance revision documents			
Contract Term: _r		Contract Value:	n/a
Compliance with I Compliance verific	Human Resources requirements ed by: _n/a	s? Yes: <u>n/a</u>	No: <u>n/a</u>
COUNTY COUNSEL: (Must approve all contracts and MOUs) / /			
Approved: Disapproved: Date: 11/2//9 By:			
Approved:	Disapproved:	Date:	By:

DI EASE EODIMADE	TO RISK MANAGEMENT THANKS		
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:
	- Landard Peruna	I THE STANK AND REAL PROPERTY.	31
OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).			
	R – May need to go to unions.		
Approved:	Disapproved:	Date:	By:
Approved:	Disapproved:	Date:	By:

EDC COUNTY COUNSEL 2019 NOV 1 AM9:40