

# CONTRACT ROUTING SHEET

Date Prepared: 7-6-11

Need Date: ASAP

**PROCESSING DEPARTMENT:**

Department: Sheriff

Dept. Contact: Sherry Bahlman

Phone #: 621-5690

Department

Head Signature: *Sherry Bahlman*

**CONTRACTOR:**

Name: Resolution for Sheriff to submit

Address: Grant applications

300 Fair Lane, Placerville, CA

Phone: \_\_\_\_\_

*John D. [Signature]*

**CONTRACTING DEPARTMENT:** Sheriff

Service Requested: Resolution to authorize Sheriff to submit grant applications and execute grant agreements for various funding programs

Contract Term: na Contract Value: 0

Compliance with Human Resources requirements? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Compliance verified by: \_\_\_\_\_

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

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: 7/7/11 By: *Justith Kern*

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

*TC w/ Ashton - option to exclude #3 since if ~~needed~~ is not necessary. Sept. wants to delete #3.*

EL DORADO COUNTY COUNSEL  
2011 JUL -6 PM 2:38

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: \_\_\_\_\_