

# CONTRACT ROUTING SHEET

Date Prepared: 12/10/2018

Need Date: 12/21/2018

**PROCESSING DEPARTMENT:**

Department: Library

Dept. Contact: Jeanne Amos

Phone #: X5546

Department Head Signature: 

**CONTRACTOR:**

Name: SirsiDynix

Address: 3300 N. Ashton Blvd. - Suite 500

Lehi, UT 84043

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

**CONTRACTING DEPARTMENT:** Library

Service Requested: Contract Review

Contract Term: 1/1/2019 - 12/31/2023 Contract Value: \$341,619.21

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

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

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

Approved: as to form Disapproved: \_\_\_\_\_ Date: 12/17/18 By: 

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

EL DORADO COUNTY COUNSEL  
20 8 DEC 10 11 11 AM '18

\* See <sup>existing</sup> Master Agreement # 178-5144 (Fenix #350) for prior comments.

\* Please add non-appropriation clause under section 9 of the Master Agmt.

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: \_\_\_\_\_