

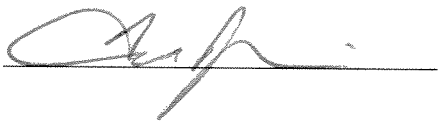
Assigned to Luce Green
Contract #: _____

CONTRACT ROUTING SHEET

Date Prepared: 9/22/08

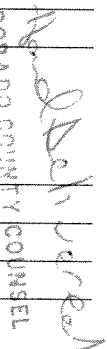
Need Date: 10/6/08

PROCESSING DEPARTMENT:

Department: HR/Risk Management
Dept. Contact: Larry Costello
Phone #: 6625
Department Authorization: 

CONTRACTOR:

Name: CSAC-EIA
Address: _____
Phone: _____

EL DORADO COUNTY COUNSEL
2008 SEP 23 PM 3:11 B


CONTRACTING DEPARTMENT: HR/Risk Management


Service Requested: Property Insurance Program MOU Amendment

Contract Term: n/a Contract/Amendment Value: n/a

Compliance with Human Resources requirements? Yes: _____ No: _____


Compliance verified by: _____

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

Approved: _____ Disapproved: _____ Date: 10/3/08 By: 
Approved: _____ Disapproved: _____ Date: _____ By: _____

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: X Disapproved: _____ Date: 9/22/08 By: L. Costello 
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: _____