

Contract #: 291-O1810
Index Code: 530500

CONTRACT ROUTING SHEET

Resubmit
Date Prepared: 11-02-2017 11-13-2017

Need Date: 11-27-2017
11-22-2017

PROCESSING DEPARTMENT:

Department: Health & Human Svcs Agency
Dept. Contact: Zhana Mc Cullough
Phone #: X 7154
Department
Head Signature: *Patricia Charles-Heathers*
Patricia Charles-Heathers, Ph.D., MPA, Director

CONTRACTOR:

Name: TransUnion
Address: 555 West Adams
Chicago, IL 60661
Phone: _____

CONTRACTING DEPARTMENT: Health and Human Services Agency

Service Requested: Foster youth credit card reports
Contract Term: perpetual Contract/Grant Value: \$0.00
Compliance with Human Resources requirements? N/A X Yes _____ No: _____
Compliance verified by: N/A - no remuneration

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

Approved: X Disapproved: _____ Date: 11/22/17 By: *PSS*
Approved: _____ Disapproved: _____ Date: _____ By: _____

NEEDS CONTRACT ADMINISTRATOR
11-22-2017
Completed
3m

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

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

Approved: _____ Disapproved: X Date: 11/22/17 By: *Robert Schneider for Marco Sandoval*
Approved: X Disapproved: _____ Date: 11-27-17 By: *MS*

* TransUnion LLC not found in Ebix
* TransUnion holding company, Inc is in Ebix but is showing inactive

ASSUME COUNTY COUNSEL IS FINE WITH SECTION 5.10 LIMITATION OF LIABILITY. IF NOT, NOTIFY FURTHER FROM RISK.
PM 3:23 HR/RM NOV 21 '17

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

NOTE: Any contract that involves the development, installation, implementation, 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: Information Technologies (under separate cover)

Approved: _____ Disapproved: _____ Date: _____ By: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____

Please contact Zhana Mc Cullough, x 7154, with questions or for contract packet pick-up. Thank you!

Yvonne Hollings 11/8/17
Chief Fiscal Officer Date

JE 11/6/17
Deputy Director, Administration and Contracts Date

A/P or A/R Mgr Approval: *[Signature]* 11/8/17
Initials/Date

Contracts ASO Approval: *[Signature]* 11/3/17
Initials/Date

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2 of 2

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Departments: Information Technologies

Approved: ✓ Disapproved: _____ Date: 11/5/2017 By: [Signature]
Approved: _____ Disapproved: _____ Date: _____ By: _____

Please contact Zhana Mc Cullough, x 7154, with questions or for contract packet pick-up. Thank you!

Chief Fiscal Officer _____ Date _____

Deputy Director, Administration and Contracts _____ Date _____

A/P or A/R Mgr Approval: _____ / _____
Initials/Date

Contracts ASO Approval: _____ / _____
Initials/Date