

CONTRACT ROUTING SHEET

Date Prepared: 10/01/09

Need Date: _____

PROCESSING DEPARTMENT:

Department: CAO/Procurement & Contracts

Dept. Contact: Bonnie H. Rich

Phone #: 5940

Department _____

Head Signature: Bonnie H. Rich

CONTRACTOR:

Name: CERTNA

Address: 222 West Hospitality Lane

San Bernardino, CA 92415

Phone: _____

CONTRACTING DEPARTMENT: Recorder/Clerk

Service Requested: Authority to participate in Electronic Recording Consortium

Contract Term: One year Contract Value: \$0.00

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

Compliance verified by: _____

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

Approved: Disapproved: _____ Date: 10-1-09 By: [Signature]

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

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: _____