

CONTRACT ROUTING SHEET

Date Prepared: 05/17/13

Need Date: 06/17/13

PROCESSING DEPARTMENT:

Department: Sheriff's Office

Dept. Contact: Tania Donnelly

Phone #: 621-6636

Department: _____

Head Signature: *John D. [Signature]*

CONTRACTOR:

Name: FBI-Sacramento Child Exploitation Task Force

Address: _____

Phone: _____

CONTRACTING DEPARTMENT: Sheriff

Service Requested: MOU for Child Exploitation Task Force and Cost Reimbursement Agreement

Contract Term: 10/1/12 - 9/30/13 retroactive Contract Value: _____

Compliance with Human Resources requirements? Yes: _____ No: N/A

Compliance verified by: _____

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

Approved: Disapproved: _____ Date: 5/21/13 By: *Shirley Ken*

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

see comments on 2/10/10 contract routing sheet that you have attached

EL DORADO COUNTY COUNSEL
2013 MAY 21 AM 9:10

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

Approved: Disapproved: _____ Date: 5/21/13 By: *Guy*

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

MOU

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

Departments: _____

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

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

RECEIVED
HUMAN RESOURCES DEPT.
13 MAY 21 PM 3:39