

Contract #: None
Index Code: ~~401141~~ 401121

CONTRACT ROUTING SHEET

Date Prepared: 2/8/13

Need Date: 2/22/13

PROCESSING DEPARTMENT:

Department: HHSA/Public Health
Dept. Contact: Kathy Lang
Phone #: X7147
Department Head Signature: *Daniel Nielson*
Daniel Nielson, M.P.A., Director

CONTRACTOR:

Name: Resolution
Address: _____
Phone: _____

EL DORADO COUNTY COUNSEL
2013 MAY 13 AM 11:49

CONTRACTING DEPARTMENT: Health and Human Services Agency/PHD

Service Requested: Resolution to increase Imprest Cash Account for P'ville vital statistics
Contract Term: _____ Contract/Grant Value: \$225
Compliance with Human Resources requirements? N/A x Yes _____ No: _____
Compliance verified by: _____

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

Approved: Disapproved: _____ Date: 2/12/13 By: *Josh Beck*
Approved: Disapproved: _____ Date: 5/13/13 By: *Josh Beck*
Resubmit 5/13/13

RECEIVED
FEB 08 2013
El Dorado County Clerk

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

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

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

does not need RM approval SA

13 FEB 13 AM 11:49

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

NOTE: All contracts that involve the acquisition of software or computer related items must be first approved by IT. Any contract that requires approval from another department must also be first approved by the other department.
Departments: _____

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

Daniel Nielson 2/1/13
PM Review/Date

Daniel Nielson 2/1/13
CFO Review/Date

Daniel Nielson 2/1/13
Contracts Supe Review/Date

Cynthia Kjaer 2/7/13
Contracts Mgr. Review/Date