Legistar #: _____

RESOLUTION ROUTING SHEET

Date Prepared:	Need Date:
PROCESSING DEPARTMENT:	
Department: Human Resources	
Contact Name: Heather Andersen	Phone:
Email Address:	
Department Head Signature: Joseph Carruesco Digitally signed by Joseph Carruesco Date: 2022.11.10 08:37:00 -08'00'	
Requesting Department:	
Service Requested: Resolution Review	
Description: Please review the attached resolution to update HR's retention schedule. We have been working with Danny Vanderkoolwyk on the schedule itself.	
COUNTY COUNSEL:	
Approved: 🖌 Disapproved:	Date: 11/16/2022
County Counsel Signature: Daniel Vandekoolwyk Digitally signed by Daniel Vandekoolwyk Date: 2022.11.16 11:58:52 -08'00'	
County Counsel Comments:	

HR APPROVAL: N/A (Resolution) RISK MANAGEMENT: N/A (Resolution)