Legistar #: _____

RESOLUTION ROUTING SHEET

Date Prepared:	Need Date:
PROCESSING DEPARTMENT:	
Department: Human Resources	
Contact Name: Monique Heredia	Phone: <u>530-621-5518</u>
Email Address:	
Department Head Signature: Joseph Carrue	Digitally signed by Joseph Carruesco Date: 2023.03.06 18:22:57 -08'00'
Requesting Department:	Org Code:
Service Requested: Resolution Review	
Upward reclass COUNTY COUNSEL:	
Approved: 🖌 Disapproved: D	ate: <u>3/21/2023</u>
County Counsel Signature: Stephen Mansell Digitally signed by Stephen Mansell Date: 2023.03.21 17:08:33 -07'00'	
County Counsel Comments:	

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