Contract #:

CONTRACT ROUTING SHEET

Date Prepared:	July 28, 2011	Need Date: Aug	ust 4, 2011
PROCESSING D Department: Dept. Contact: Phone #: Department Head Signature:	Sheriff Don Ashton X - 5691	CONTRACTOR: Name: US Department Address: Washing: 202-305-	
CONTRACTING DEPARTMENT: Sheriff Service Requested: Asset Seizure Participation Certification			
Contract Term: I	End June 30, 2011	Contract Value:	\$0.00
	Human Resources requirements	? Yes:	No:
COUNTY COUNSEL: (Must approve all contracts and MOU's)			
Approved:	/ Disapproved:	Date: 8.3.11	By: Callings
Approved:	Disapproved:	Date:	By:
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PLEASE FORWARD TO RISK MANAGEMENT. THANKS! RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements) Approved: Disapproved: Date: 8411 By: Management By: M			
Approved:	Disapproved:	Date:	By:
OTHER APPROVA	AL: (Specify department(s) parti	cipating or directly affecte	d by this contract).
Approved:	Disapproved:	Date:	Ву:
Approved:	Disapproved:	Date:	By: