Contract #: ED CC CONTRACT ROUTING SHEET Date Prepared: September 1, 2011 **Need Date:** PROCESSING DEPARTMENT: CONTRACTOR: Department: Human Resources Name: Dept. Contact: Lorraine Barber Address: 1/344 Cotoma Phone #: 5573 Department **Human Resources** Head Signature: CONTRACTING DEPARTMENT: Human Resources Service Requested: Approval of Criminal Attorneys' Association MOU Contract Term: 07/01/2010-12/31/2013 Contract Value: Compliance with Human Resources requirements? Yes: No: Compliance verified by: Karl Knobelauch Director of Human Resources **COUNTY COUNSEL:** (Must approve all contracts and MOU's) Approved: Disapproved: Date: Approved: Disapproved: Date: PLEASE FORWARD TO RISK MANAGEMENT. THANKS! RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements) Approved: Disapproved: Date: Approved: Disapproved: Date: By:

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

Date:

Date:

Disapproved:

Disapproved:

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By:

By:

Departments: Approved:

Approved: