

CONTRACT ROUTING SHEETDate Prepared: 4/9/12Need Date: ASAP**PROCESSING DEPARTMENT:**

Department: Sheriff's OES
 Dept. Contact: Tania Donnelly
 Phone #: 621-6636
 Department: [Signature]
 Head Signature: [Signature]

CONTRACTOR:

Name: Resolution for Sheriff to submit
 Address: Grant applications
300 Fair Lane
 Phone: _____

CONTRACTING DEPARTMENT: SheriffService Requested: Resolution to authorize Sheriff to submit grant applications and execute grant agreements for various funding programsContract Term: 7/1/12 – 6/30/13 Contract Value: N/ACompliance with Human Resources requirements? Yes: _____ No: N/A

Compliance verified by: _____

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

Approved: ✓ Disapproved: _____ Date: 6/13/12 By: [Signature]
 Approved: _____ Disapproved: _____ Date: _____ By: _____

TC W T Donnelly - Dept will be submitting grant applications to Board for approval. This only addresses applications.

EL DORADO COUNTY COUNSEL
 2012 APR 11 AM 9:58

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

Approved: ✓ Disapproved: _____ Date: 6-15-12 By: [Signature]
 Approved: _____ Disapproved: _____ Date: _____ By: _____

RISK MANAGER
EL DORADO COUNTY

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

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

RECEIVED
 HUMAN RESOURCES DEPT.
 12 JUN 14 PM 4:08