

CONTRACT ROUTING SHEET

Date Prepared: 10/15/12

Need Date: 10/19/12

PROCESSING DEPARTMENT:

Department: Chief Administrative Office
Dept. Contact: Sue Hennike
Phone #: 621-5577

CONTRACTOR:

Name: Multiple Contractors
Address: Letter waiving audits required
Phone: _____

Department _____
Head Signature: [Signature]

EL DORADO COUNTY COUNSEL
2012 OCT 15 AM 11:55

CONTRACTING DEPARTMENT: Chief Administrative Office

Service Requested: Promotions Activities

Contract Term: Various Contract Value: Various

Compliance with Human Resources requirements? Yes: N/A No: _____

Compliance verified by: _____

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

Approved: [check] Disapproved: _____ Date: 10/17/12 By: [Signature]
Approved: _____ Disapproved: _____ Date: _____ By: _____

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

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

N/A

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

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