CONTRACT ROUTING SHEET

Date Prepared:	2/6/2013	Need Date: As soon as posible
PROCESSING DI Department: Dept. Contact: Phone #: Department Head Signature:	EPARTMENT: Agriculture Myrna Tow 6647 Charlene Carveth	CONTRACTOR: Name: EDC Agriculture Department Address: 311 Fair Lane Placerville, CA 95667 Phone: (530) 621-5520
Contract Term: _1	d: Please review attached Re 1/2/13 sunsets 1/1/16 Human Resources requirements	nia Dept of Food and Agriculture RETRO esolution and Table A of Fee Schedule Contract/Amendment Value: ? Yes: No:
Approved: Approved: Approved:	EL: (Must approve all contracts Disapproved: ☐ Date: Disapproved: ☐ Date:	
RISK MANAGEM Approved:	ENT: (All contracts and MOU's Disapproved:	except boilerplate grant funding agreements) By: By:
OTHER APPROV Departments: Approved:	AL: (Specify department(s) participal Disapproved: Date: Disapproved: Date:	rticipating or directly affected by this contract). By: By: