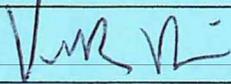


# CONTRACT ROUTING SHEET

Date Prepared: 7/3/13

Need Date: ASAP

**PROCESSING DEPARTMENT:**

Department: District Attorney  
Dept. Contact: Nancy Anderson  
Phone #: 621-6484  
Department Head Signature: 

**CONTRACTOR:**

Name: Placerville Police Department  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

**CONTRACTING DEPARTMENT:** District Attorney

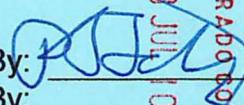
Service Requested: Operational Agreement re use and maintenance of Multidisciplinary Interview Center (MDIC)

Contract Term: Five Years Contract Value: \$9,000.00

Compliance with Human Resources requirements? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Compliance verified by: \_\_\_\_\_

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

Approved: X Disapproved: \_\_\_\_\_ Date: 7/10/13 By:   
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

Previous Operational Agreement No. 494-M1011, July 15, 2011 through June 30, 2013.

This new Agreement shall supersede Operational Agreement No. 494-M1011.

EL DOR COUNTY COUNSEL  
2013 JUL 10 PM 2:30

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: \_\_\_\_\_

*Operation agreement - nothing for Risk Geyh*

RECEIVED  
HUMAN RESOURCES DEPT.  
13 JUL 11 PM 1:18

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

Departments: \_\_\_\_\_  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_