		Contract #: Index Code:		Admin-Update 2014		
	CONTRACT ROUTING SHEET					
Date Prepared:	3/20/14	Need Date:	3/27	/14 - for 4/15/14 BOS		
PROCESSING DI Department:	EPARTMENT: Health & Human Services			ing & Urban		
Dept. Contact: Phone #: Department Head Signature:	Amy Higdon x4836	A L L				
	~ A	Phone:				
	DEPARTMENT: HHSA – Cor d: Resolution review for Publi 2014		nnual A	Admin Plan Update		
Contract Term: Compliance with I Compliance verifie	Human Resources requirements	\bar{s} ? N/A $\underline{\times}$	nt Valu Yes	le: <u>\$</u> No:		
COUNTY COUNS Approved: Approved:	EL: (Must approve all contract Disapproved: Disapproved:	_ Date: <u>3/26/20</u>		By: <u>K. MacEhan</u> By: <u>F</u>		
				R COUNTY AM		
Please contact An	ny Higdon for pick-up. Thank ye PLEASE FORWARD TO RISI	ou! < MANAGEMENT. THAI				
RISK MANAGEM Approved:	ENT: (All contracts and MOU's	except boilerplate gr	ant fun	675		
Approved:	Disapproved:	Date:		By:		
NOTE: Any contract	AL: (Specify department(s) pa t that involves the development, inst information, the acquisition of softw	allation, implementation,	storing,	retrieving, transfer, or		

that may be IT related, especially those that involve computers and telecommunications, must be approved by IT before submission to Counsel. This also applies to any other contract that requires approval from another department. Departments:

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Approved:	Disapprove	d: Date:	Ву	
Approved:	Disapprove	d: Date:	Ву	