

# CONTRACT ROUTING SHEET

Date Prepared: 3-29-11

Need Date: 4-5-11

**PROCESSING DEPARTMENT:**

Department: Sheriff  
Dept. Contact: Sherry Bahlman  
Phone #: 621-5690  
Department Head Signature: *Sherry Bahlman*

**CONTRACTOR:**

Name: County of Sacramento, Coroner  
Address: 4800 Broadway, Suite 100  
Sacramento, CA 95820  
Phone: 916 874-9321

**CONTRACTING DEPARTMENT:** Sheriff

Service Requested: Provide autopsy support and morgue services on an "as requested" basis for the Sheriff's Office, Coroner Division

Contract Term: 7-1-11 to 6-30-14 Contract Value: \$150,000

Compliance with Human Resources requirements? Yes: x No:         

Compliance verified by: Chris Little/HR has no objections to contract

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

Approved: ✓ Disapproved:          Date: 5-10-11 By: *[Signature]*  
Approved:          Disapproved:          Date:          By:         

RECEIVED  
HUMAN RESOURCES DEPT  
MAY 10 AM 10:52  
EL DORADO COUNTY COUNSEL  
MAY 10 AM 10:52

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: ✓ Disapproved:          Date: 5/10/11 By: *[Signature]*  
Approved:          Disapproved:          Date:          By:         

Government Agency

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

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