

# CONTRACT ROUTING SHEET

Date Prepared: August 23, 2013

Need Date: September 6, 2013

**PROCESSING DEPARTMENT:**

Department: Procurement & Contracts  
Dept. Contact: Linda Silacci-Smith *LS*  
Phone #: x5417  
Department Head Signature: *[Signature]*

**CONTRACTOR:**

Name: Martha Shaver  
Address: 8151 Deer Ridge Lane  
Ione, CA 95640  
Phone: \_\_\_\_\_

**CONTRACTING DEPARTMENT:** Human Resources

Service Requested: Human Resources consulting  
Contract Term: Extend 14 months Contract Value: Increase to \$135,000.00  
Compliance with Human Resources requirements? Yes: X No: \_\_\_\_\_  
Compliance verified by: Mike Stella - 08/22/13

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

Approved: ✓ Disapproved: \_\_\_\_\_ Date: 8/27/13 By: *[Signature]*  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

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

Approved: ✓ Disapproved: \_\_\_\_\_ Date: 8/29/13 By: *[Signature]*  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

EL DORADO COUNTY COUNSEL  
2013 AUG 29 9:50

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

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