		Contract #:	Resolution-Animal Services Fees
		Index Code:	
	CONTRACT RO		
	CONTRACTING		
Date Prepared:	6/24/14	Need Date: 1	18/14
PROCESSING D Department: Dept. Contact: Phone #: Department Head Signature:	Health & Human Services Amy Higdon x4836	FUNDING AGENCY Name: Address: Phone:	EL 2014 JU 0000000
	DEPARTMENT: HHSA – Publi	in Haalth	COUNTY 30 P
	d: Resolution to revise Animal		
Contract Term:		Contract/Grant Valu	
	Human Resources requirements'		No: 🙄 🚰
	ed by:		
Approved: X	SEL: (Must approve all contracts Disapproved: Disapproved:	and MOU's) Date: Date:	By: PH Jacky By:
RISK MANAGEM Approved: Approved:	PLEASE CONTACT AMY HIGDON A ENT: (All contracts and MOU's of Disapproved: Disapproved:		
NOTE: Any contract sending of electronic that may be IT related	AL: (Specify department(s) part t that involves the development, insta information, the acquisition of softwa ed, especially those that involve comp o Counsel. This also applies to any of Disapproved: Disapproved:	llation, implementation, storing are or computer related items, o uters and telecommunications,	, retrieving, transfer, or or any other service/item must be approved by IT
			-,-
CFO Review/D	ate/ 0/2/0/14	Ásst Director Admin/Finance Da	34/4 14 0050 A 1 -61

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