Contract #: Amended CAC Bylaws

Index Code: 531011

CONTRACT ROUTING SHEET

| Date Prepared: | 12/12/14 12/18/14 | Need Date: | 23)14 |
|--|--|--|--|
| PROCESSING DI Department: Dept. Contact: Phone #: Department Head Signature: CONTRACTING I Service Requeste | EPARTMENT: Health & Human Services Amy Higdon x4836 Don Ashton, M.P.A., Director DEPARTMENT: HHSA/Comd: Review of amended Com | CONTRACTOR: Name: Address: Phone: munity Services munity Action Council Byla | WS |
| Compliance with I | Human Resources requiremen | its? N/A x Yes | No. |
| Approved: | EL: (Must approve all contraction Disapproved: Disapproved: | cts and MOU's) Date: <u> 2 30 14</u> Date: | By: Production in the second s |
| See comments | addressed. Amplight | x4836 FOR PICK UP. THANK | |
| RISK MANAGEM Approved: Approved: | ENT: (All contracts and MOU Disapproved: Disapproved: | 's except boilerplate grant Date: | funding agreements) |
| NOTE: Any contract sending of electronic that may be IT relate before submission to department. Departments: Approved: | AL: (Specify department(s) p t that involves the development, including information, the acquisition of soft ind, especially those that involve color Counsel. This also applies to any Disapproved: Disapproved: | stallation, implementation, stor tware or computer related item mputers and telecommunication of y other contract that requires a | cted by this contract). ing, retrieving, transfer, or s, or any other service/item ins, must be approved by IT |
| AAAAA. | 1. J. | | M. |

Program Manager II, Admin & Contracts Date