Contract #: Boilerplate OJT Contract | 831182

Index Code:

CONTRACT ROUTING SHEET

Date Prepared:	11-25-13	Need Date:	3114 hw B B
PROCESSING DI	EPARTMENT:	CONTRACTOR:	ir mar
Department:	HHSA/CS	Name: Various	
Dept. Contact:	DeAnn Osborn	Address:	3 P
Phone #:	X7118		
Department	-	Phone:	
Head Signature:	Deces		: <u>°</u>
_	Don Ashton, M.P.A.,		07
	Interim Director		<u> </u>
CONTRACTING	DEPARTMENT: HHSA/Commur	nity Services (WIA)	COUNSELEL DOI
Service Requeste	d: Agency Agreement for Workfo	orce Investment Act On-	
Con noc moquotic	Placements		
Contract Term: 1	Up to twelve months	Contract/Grant Va	lue: Up to \$8,000 \$
	Human Resources requirements?	N/A Yes	No:⊋ N/A
Compliance verifi		**************************************	= 0
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\ /	SEL: (Must approve all contracts a		- m-7 電
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Approved: X		Date: 💆 🎞 🖰	By: Phanks
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	PLEASE FORWARD TO RISK N	ANAGEMENT. THANK YO	UI & TOTAL
RISK MANAGEN	IENT: (All contracts and MOU's ex	xcept boilerplate grant fu	inding agreements) 🗀
Approved:	Disapproved:	Date: 1/31/2014	_ By: 📿 🚈 🚊
Approved:	Disapproved:	Date:	By: 0 / 3
	10 insurance provisio	ns -nothing for R	ist to appoint
		<i></i>	4 675
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OTHER APPROV	/AL: (Specify department(s) partic	cipating or directly affect	ed by this contract) 💬
NOTE: Any contract	that involves the development, installation, the acquisition of software or computer.	on, implementation, storing, n for related items, or any oth	er service/item that mail he li
	iose that involve computers and telecom		
	applies to any other contract that requires		
Departments:			
Approved:	Disapproved:	Date:	By:
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Contracts Supe Review/	Date Program Mgr. Review/Date	Contracts Mgr. Review/Date	CFO Review/Date 12/2/13
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same same (GGGGF)		1-1-10	15-0288 C 1 of 5

Contract #:

Boilerplate WEX Outside Employer

Agreement

Index Code: 5 831182

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Date Prepared:	117/14 HW	Need Date:	31/14/hm
PROCESSING D	EPARTMENT:	CONTRACTOR:	
Department:	HHSA/CS	Name: Various	3
	DeAnn Osborn	Address:	
•	X7118		
Department	7//110	Phone:	
Head Signature:	8 COD	THORIO.	
i lead Olynature.	Don Ashton, M.P.A.,		
	Interim Director		
	interim Director		
Service Requeste Contract Term: Compliance with Compliance verificounty County	Human Resources requirements?	Contract/Grant \ N/A Yes	Vork Experience Client Value: Up to \$\frac{1}{2}00\frac{1}{2} By: Up to \$\frac{1}{2}000\frac{1}{2}0000\frac{1}{2}0000\frac{1}{2}0000\frac{1}{2}0000\frac{1}{2}0000\frac{1}{2}0000\frac{1}{2}0000\frac{1}{2}0000\frac{1}{2}0000\frac{1}{2}0000\frac{1}{2}00000\frac{1}{2}00000\frac{1}{2}00000\frac{1}{2}000000\frac{1}{2}0000000000000000000000000000000000
RISK MANAGEN	PLEASE FORWARD TO RISK MENT: (All contracts and MOU's		
Approved:	Disapproved:	Date: 8180114	By: Bugne
Approved:	Disapproved:	Date:	By: By:
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Approved:	Disapproved:	Date:	By:
Approved:	Disapproved:	Date:	By:
, whice	Disappiored.		~J.
Please co	ntact DeAnn Osborn x7 (12 with ques	tions or to contine back	et plok-up. Thank you!
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Contracts Supe Review	Date Program Mgr. Review/Date	Contracts Mgr. Review/Date	15 9288 6 Port 5 111

Contract #:

Boilerplate WEX Agency Agreement

Index Code:

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CONTRACT ROUTING SHEET

Date Prepared:	1/1/14 the	Need Date:	31/14 1two	2014
PROCESSING D	EPARTMENT:	CONTRACTOR:		R ADO
Department:	HHSA/CS	Name: Various	s	* 0
Dept. Contact:	DeAnn Osborn	Address:	_	္မံ ခ်ို
Phone #:	X7118			
Department		Phone:		
Head Signature:	D. C. O.	All and a second		cpuNSE : 07
• • • • • • • • • • • • • • • • • • • •	Don Ashton, M.P.A.,			JNSE
	Interim Director			~
CONTRACTING	DEPARTMENT: HHSA/Commu	inity Services (WIA)		
	ed: Agency Agreement for Workf		ork Experience	e Client
•	Placements			
Contract Term:	Up to six months	Contract/Grant \	Value: Up to	\$8,000=
Compliance with	Human Resources requirements?	N/A Ye	s	No g
Compliance verifi	ied by:			- Xi
COLINTAL COLINI	SEL . (Must see seus all sentencts	and MOUTEN	,	₹ 8
	SEL: (Must approve all contracts Disapproved: 😾	Date: 1/29/14	By(PAZ	
Approved: X	Disapproved: X	Date: 3/4/14	By: O	
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DISK MANAGER	PLEASE FORWARD TO RISK MENT: (All contracts and MOU's e	MANAGEMENT. THANK)	YOUI I funding agre	emānte)
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OTHER APPRO	VAL: (Specify department(s) parti	icipating or directly affe	ected by this c	optract);
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	on, the acquisition of software or computose that involve computers and telecon			
	applies to any other contract that requires			ore submission to
Departments:				
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Approved:	Disapproved:	Date:	By:) N D
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Please co	ntact DeAnn Cabort x7418 with quest	lone grifor contract pack	et pick-up. The	nk yout
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	Boilerplate IR Agreement	
Index Code:	5831182	
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	CONTRACT F	COUTING SHEET	
Date Prepared:	1/17/14 Hw	Need Date: 13/14/tru	U
PROCESSING D Department: Dept. Contact: Phone #:	EPARTMENT: HHSA/CS DeAnn Osborn X7118	CONTRACTOR: Name: Various Address:	
Department Head Signature:	_	Phone:	EL 2
Service Requeste	Training	orkforce Investment Act Individual I	NO
	Up to three years Human Resources requiremer ied by:	Contract/Grant Value: _L its? N/A Yes	_ None ∃
Approved:	SEL: (Must approve all contra Disapproved: Disapproved:	cts and MOU's) Date:By: Date:By:	Just Brelo
RISK MANAGER Approved: Approved:		Date: By:	agreements)
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NOTE: Any contract electronic information related, especially the	t that involves the development, inst on, the acquisition of software or co nose that involve computers and tel	participating or directly affected by tallation, implementation, storing, retrieving mputer related items, or any other serving ecommunications, must be approved by luires approval from another department.	, transfer, or sending o ce/item that may be ill
Approved:	Disapproved:	Date: By:	
Approved:	Disapproved:	Date: By:	
A Osloba "/a Contracts Supe Review		Lontracts Mgr. Review/Date	Resident State Control
Rev. 12/2000 (GS-GVP)		12 14 1.4	88 C 4 of 5

Contract #: Boilerplate ITA Agreement Index Code: 5 \$31182 CONTRACT ROUTING SHEET

Date Prepared:	117/14 HW	Need Date:	131114/hw
PROCESSING DE Department: Dept. Contact: Phone #: Department Head Signature:	PARTMENT: HHSA/CS DeAnn Osborn X7118 Don Ashton, M.P.A., Interim Director	CONTRACTOR: Name: Various Address: Phone:	S
	DEPARTMENT: HHSA/Com d: Agency Agreement for Wo for Client Training Service	orkforce Investment Act In	dividual Training Account
Contract Term: L Compliance with Compliance verific	Jp to three years Human Resources requirement	Contract/Grant \	/alue: <u>Up to \$8,000 ≥</u>
	SEL: (Must approve all contraction Disapproved: Disapproved:		By: 1.1886 By: 3. 18
	DI SACE CORWADO TO DIS	BK MANAGEMENT. THANK	ZOU!
RISK MANAGEN Approved: Approved:	IENT: (All contracts and MOU' Disapproved: Disapproved: 10 Think foe Ris	's except boilerplate grant Date: <u></u>	a manager of
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NOTE: Any contract electronic information related, especially the Counsel. This also a Departments:	AL: (Specify department(s) p that involves the development, instant, the acquisition of software or corose that involve computers and telepplies to any other contract that requires	llation, implementation, storing mputer related items, or any c communications, must be app ires approval from another dep	, retrieving, transfer, or sending of other service/item that may be IT proved by IT before submission to partment.
Approved:	Disapproved: Disapproved:	Date:	By: By:
Pléase con	itact DeAnia Osbom x7118 with qu	eations of for contract pack	et pick-up. Thank you!
Contracts Supe Review/Rev. 12/2000 (GS-GVP)	Date Program Mgr. Review/Date	Contracts Mgr. Review/Date	15-0288 C 5 015