

Contract #: Boilerplate OJT Contract
Index Code: 831182

CONTRACT ROUTING SHEET

Date Prepared: 11-25-13

Need Date: 1/31/14

PROCESSING DEPARTMENT:

Department: HHS/CS
Dept. Contact: DeAnn Osborn
Phone #: X7118
Department
Head Signature: [Signature]

CONTRACTOR:

Name: Various
Address:
Phone:

Don Ashton, M.P.A.,
Interim Director.

CONTRACTING DEPARTMENT: HHS/Community Services (WIA)

Service Requested: Agency Agreement for Workforce Investment Act On-the-Job Training Client Placements

Contract Term: Up to twelve months Contract/Grant Value: Up to \$8,000

Compliance with Human Resources requirements? N/A Yes No: N/A

Compliance verified by:

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

Approved: X Disapproved: _____ Date: 1/20/14 By: [Signature]
Approved: X Disapproved: _____ Date: 5/4/14 By: [Signature]

see comments

2/20/14 Corrections made (HW)

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

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

Approved: _____ Disapproved: _____ Date: 1/31/2014 By: [Signature]
Approved: _____ Disapproved: _____ Date: _____ By: _____

no insurance provisions - nothing for Risk to approve

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

NOTE: Any contract that involves the development, installation, implementation, storing, retrieving, transfer or sending of electronic information, the acquisition of software or computer related items, or any other service/item that may be IT related, especially those that involve computers and telecommunications, must be approved by IT before submission to Counsel. This also applies to any other contract that requires approval from another department.

Departments:

Approved: _____ Disapproved: _____ Date: _____ By: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____

Please contact DeAnn Osborn x7118 with questions or for packet pick-up. Thank you!

[Signature] 1/26/13
Contracts Supe Review/Date

Program Mgr. Review/Date

[Signature]
Contracts Mgr. Review/Date

[Signature] 1/23/13
CFO Review/Date

EL DORADO COUNTY COUNSEL
2014 MAR -3 PM 1:07
2014 JAN 2
AM 10:32
2014 MAR 15 AM 8:06
REC'D
HUMAN RESOURCES DEPT.
5 AM

Contract #: Boilerplate WEX Outside Employer Agreement

Index Code: 5831182

CONTRACT ROUTING SHEET

Date Prepared: 1/17/14 HW

Need Date: 1/31/14 HW

PROCESSING DEPARTMENT:

Department: HSA/CS

Dept. Contact: DeAnn Osborn

Phone #: X7118

Department

Head Signature: *[Signature]*

Don Ashton, M.P.A.,
Interim Director

CONTRACTOR:

Name: Various

Address:

Phone:

CONTRACTING DEPARTMENT: HSA/Community Services (WIA)

Service Requested: Agency Agreement for Workforce Investment Act Work Experience Client Placements

Contract Term: Up to six months Contract/Grant Value: Up to \$250,000

Compliance with Human Resources requirements? N/A Yes No

Compliance verified by:

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

Approved: Disapproved: Date: 2/19/14 By: *[Signature]*

Approved: Disapproved: Date: By:

EL PASO COUNTY COUNSEL
2014 JAN 21 AM 10:32

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

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

Approved: Disapproved: Date: 2/20/14 By: *[Signature]*

Approved: Disapproved: Date: By:

Nothing for Risk to approve

RECEIVED
RISK MGMT
FEB 19 PM 3:00

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

NOTE: Any contract that involves the development, installation, implementation, storing, retrieving, transfer, or sending of electronic information, the acquisition of software or computer related items, or any other service/item that may be IT related, especially those that involve computers and telecommunications, must be approved by IT before submission to Counsel. This also applies to any other contract that requires approval from another department.

Departments:

Approved: Disapproved: Date: By:

Approved: Disapproved: Date: By:

Please contact DeAnn Osborn x7118 with questions or for contract packet pick-up. Thank you!

[Signature] 1/26/13
Contracts Supe Review/Date

Program Mgr. Review/Date

[Signature]
Contracts Mgr. Review/Date

[Signature]
15-0288-02-015

Contract #: Boilerplate WEX Agency Agreement
Index Code: 831182

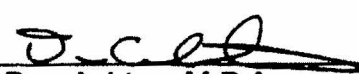
CONTRACT ROUTING SHEET

Date Prepared: 1/17/14 (HW)

Need Date: 1/31/14 (HW)

EL DORADO COUNTY COUNSEL
2014 MAR -3 PM : 07

PROCESSING DEPARTMENT:

Department: HSA/CS
Dept. Contact: DeAnn Osborn
Phone #: X7118
Department
Head Signature: 
Don Ashton, M.P.A.,
Interim Director

CONTRACTOR:

Name: Various
Address: _____
Phone: _____

CONTRACTING DEPARTMENT: HSA/Community Services (WIA)


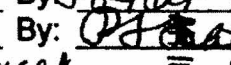
Service Requested: Agency Agreement for Workforce Investment Act Work Experience Client Placements

Contract Term: Up to six months Contract/Grant Value: Up to \$8,000

Compliance with Human Resources requirements? N/A Yes _____ No _____

Compliance verified by: _____

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

Approved: _____ Disapproved: X Date: 1/29/14 By: 
Approved: X Disapproved: _____ Date: 2/4/14 By: 

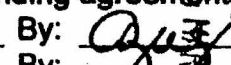
All re kmin. employe or value to provide meet back
appears unlawful.

2/17/14 Corrections made-HW

EL DORADO COUNTY COUNSEL
2014 JAN 21 10:32

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

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

Approved: _____ Disapproved: _____ Date: 3/5/14 By: 
Approved: _____ Disapproved: _____ Date: _____ By: _____

Nothing for Risk to Approve

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

NOTE: Any contract that involves the development, installation, implementation, storing, retrieving, transfer, or sending of electronic information, the acquisition of software or computer related items, or any other service/item that may be IT related, especially those that involve computers and telecommunications, must be approved by IT before submission to Counsel. This also applies to any other contract that requires approval from another department.

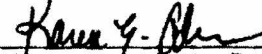
Departments:

Approved: _____ Disapproved: _____ Date: _____ By: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____

Please contact DeAnn Osborn, 7118 with questions or for contract packet pick-up. Thank you!

 1/20/13
Contracts Supe Review/Date

Program Mgr. Review/Date


Contracts Mgr. Review/Date


CFO Review/Date

HUMAN RESOURCES DEPT
RECEIVED
MAR 5 AM 8:00

Contract #: Boilerplate IR Agreement
Index Code: 5831182

CONTRACT ROUTING SHEET

Date Prepared: 1/17/14 HW Need Date: 1/31/14 HW

PROCESSING DEPARTMENT:

Department: HSA/CS
Dept. Contact: DeAnn Osborn
Phone #: X7118
Department
Head Signature: Don Ashton, M.P.A.,
Interim Director

CONTRACTOR:

Name: Various
Address:
Phone:

CONTRACTING DEPARTMENT: HSA/Community Services (WIA)

Service Requested: Agency Agreement for Workforce Investment Act Individual Referral and Training
Contract Term: Up to three years Contract/Grant Value: Up to \$8,000
Compliance with Human Resources requirements? N/A Yes No
Compliance verified by:

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

Approved: ✓ Disapproved: _____ Date: 2/19/14 By: Trish Beck
Approved: _____ Disapproved: _____ Date: _____ By: _____

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

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

Approved: _____ Disapproved: _____ Date: 2/20/14 By: Guy
Approved: _____ Disapproved: _____ Date: _____ By: _____
nothing for risk to approve

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

NOTE: Any contract that involves the development, installation, implementation, storing, retrieving, transfer, or sending of electronic information, the acquisition of software or computer related items, or any other service/item that may be IT related, especially those that involve computers and telecommunications, must be approved by IT before submission to Counsel. This also applies to any other contract that requires approval from another department.

Departments:

Approved: _____ Disapproved: _____ Date: _____ By: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____

Please contact DeAnn Osborn x7118 with questions or for contract packet pick-up. Thank you!

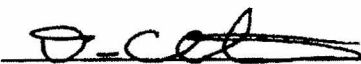
DeAnn Osborn 1/26/13 Contracts Supe Review/Date
Karen G. Bl... Program Mgr. Review/Date
[Signature] Contracts Mgr. Review/Date
[Signature] CFO Review/Date
12/21/13
15-0288 C 4 of 5

EL DORADO COUNTY COUNSEL
2014 JAN 21 AM 10:32
RECEIVED
HUMAN RESOURCES DEPT.
JAN 19 PM 3:59

Contract #: Boilerplate ITA Agreement
Index Code: 5131182

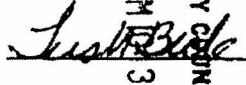
CONTRACT ROUTING SHEET

Date Prepared: 1/17/14 thw Need Date: 1/31/14 thw

PROCESSING DEPARTMENT:
Department: HSA/CS
Dept. Contact: DeAnn Osborn
Phone #: X7118
Department
Head Signature: 
Don Ashton, M.P.A.,
Interim Director

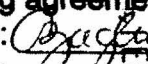
CONTRACTOR:
Name: Various
Address: _____
Phone: _____

CONTRACTING DEPARTMENT: HSA/Community Services (WIA)
Service Requested: Agency Agreement for Workforce Investment Act Individual Training Account for Client Training Services
Contract Term: Up to three years Contract/Grant Value: Up to \$8,000
Compliance with Human Resources requirements? N/A Yes _____ No _____
Compliance verified by: _____

COUNTY COUNSEL: (Must approve all contracts and MOU's)
Approved: Disapproved: _____ Date: 2/17/14 By: 
Approved: _____ Disapproved: _____ Date: _____ By: _____

DORADO COUNTY COUNSEL
2014 JAN 21 AM 11:32

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)
Approved: _____ Disapproved: _____ Date: 2/20/14 By: 
Approved: _____ Disapproved: _____ Date: _____ By: _____
nothing for risk to approve

RECEIVED
RISK MGMT SERVICES DEPT
FEB 19 PM 3:18

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract)
NOTE: Any contract that involves the development, installation, implementation, storing, retrieving, transfer, or sending of electronic information, the acquisition of software or computer related items, or any other service/item that may be IT related, especially those that involve computers and telecommunications, must be approved by IT before submission to Counsel. This also applies to any other contract that requires approval from another department.
Departments:
Approved: _____ Disapproved: _____ Date: _____ By: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____

Please contact DeAnn Osborn x7118 with questions or for contract packet pick-up. Thank you!

 1/26/13
Contracts Supe Review/Date
Program Mgr. Review/Date

Contracts Mgr. Review/Date

CFO Review/Date
17.17.13 15-0288 C 5 of 5