Contract #:

CONTRACT ROUTING SHEET

Date Prepared:	07/31/2015	Need Date: 08/0	6/2015
PROCESSING D Department: Dept. Contact: Phone #: Department Head Signature:	Elections Linda Webster 7483	CONTRACTOR: Name: N/A Address: Phone:	
CONTRACTING	DEPARTMENT: <u>Elections</u> d: Approval of Resolution		
Contract Term:		Contract Value:	\$0.00
	Human Resources requirements?		No:
COUNTY COUNSEL: (Must approve all contracts and MOU's)			
Approved:	Disapproved:	Date: 8/05/	By: Un the Ku
Approved:	Disapproved:	_ Date: _ / /	By:
	TO RISK MANAGEMENT. THANKS!	except boilerplate grant f	unding agreements)
Approved:	Disapproved:	Date:	By:
Approved:	Disapproved:	_ Date:	By:
OTHER APPROV Departments:	AL: (Specify department(s) part	icipating or directly affec	ted by this contract).
Approved:	Disapproved:	Date:	By:
Approved:	Disapproved:	_ Date:	By: