## CONTRACT ROUTING SHEET

Date Prepared:	2/24/12	Need Dat	e: 3/X/12		
PROCESSING D	FPARTMENT:	CONTRA	CTOR:		
Denartment:	CAO-FACILITIES	Name:		av Propert	ies IIC
Dept. Contact:	RUSS FACKREIL	Address:			
Phone #:		Addicss.	South Lake		
FIIOHE #.	(530) 621-7596		Attn: Ross		
			Groelz	GIUEIZ ali	u Caroi
Demandracint		Dhonor		16.10	
Department	SZ/LV00	Phone:	(530) 541-4	+040	<del></del>
<del>Head</del> Signature:	1 4 hull				
CONTRACTING	DEPARTMENT: DEPARTME	DUT OF TA	DANCE PORT	17701	
	ed: Lease amendment for 924 Em	erald Bay Rd	offices of Di	OT in SI T	
Contract Term:		Contract Value		\$0.00	
The control of the co	Human Resources requirements?		N/A	No:	
		165.	IN/A	140.	
Compliance verifi	ea by:				
COUNTY COUNS	SEL: (Must approve all contracts a	nd MOU's)			F3
Approved:		Date: 3/9/	2	By: D.L.	THE STATE OF THE S
Approved:		Date:		By:	Marasian -
Approved.					
					1 0
					<del></del>
				**************************************	ω 6
*					- 2
					<del></del>
			• • • • • • • • • • • • • • • • • • • •		
DI FASE FORWARI	D TØ RISK MANAGEMENT. THANKS!			۸.	
RISK MANAGEN	<b>IENT:</b> (All contracts and MOU's ex	cent hoilernla	te grant fund	ling agree	ments)
Approved:		Date: 3'\		By:m	
Approved:		Date:	170	型型 到	N 5
Approved.	Disappioved.	Date.		BEECH	<u> </u>
<del></del>				<del>2</del> 3	70
				AB AO	<u> </u>
				GEO EMO EMO EMO EMO EMO EMO EMO EMO EMO E	<del></del>
				<u> </u>	<u> </u>
				EZ	<u>;;</u> ;;
					S0
	<b>/AL:</b> (Specify department(s) partic	ipating or dire	ctly affected	by this co	ntract).
Departments:					
Approved:	Disapproved:	Date:		Ву:	
Approved:		Date:		By:	
-					
					7
				09-140	5.4A.1
Rev. 12/2000 (GS-GVP)					