

CONTRACT ROUTING SHEET

Date Prepared: 1/5/16

Need Date: 2/05/16

PROCESSING DEPARTMENT:

Department: Sheriff's Office
Dept. Contact: Tania Donnelly T.D.
Phone #: 621-6636
Department: Jan Donnelly 2/5/16
Head Signature: [Signature]

CONTRACTOR:

Name: County of Sacramento
Address: 4800 Broadway, Suite 100
Sacramento, CA 958203
Phone: 916-874-9321

CONTRACTING DEPARTMENT: Sheriff

Service Requested: Autopsy support and morgue services as needed

Contract Term: 7/1/16 to 6/30/18 Contract Value: \$180,000

Compliance with Human Resources requirements? Yes: No:

Compliance verified by:

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

Approved: Disapproved: Date: 2/5/16 By: Judith [Signature]
Approved: Disapproved: Date: By:

Note: Contract term to commence following termination of old agreement in June. Reference to types of cases has been deleted from scope of services.

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

Approved: Disapproved: Date: 2/9/16 By: [Signature]
Approved: Disapproved: Date: By:

Sac County provides evidence of self-insured status when new contract is fully executed

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

Departments:

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

EL DORADO COUNTY COUNSEL
2016 FEB - 4 PM 3:50

EL DORADO COUNTY COUNSEL
2016 FEB - 9 PM 1:45