

Counsel please include this information in your billing description.	>	Resolution #: 16-41516	Legistar # 16-0407	P&C # N/A
	>	Index Code: Various –		
	>	Special Districts	Charge To #: No Charge	
	>	Project Description:	Assessment Resolution and Hearing – CSA #2 Benefit Assessments	

CONTRACT ROUTING SHEET

PROCESSING DEPARTMENT:

CONTRACTOR:

<p>Department: <u>CDA/Admin & Finance Division</u></p> <p>Dept. Contact: <u>Ruth Young</u></p> <p>Phone: <u>x5934</u></p> <p>Authorized Signature: <u><i>Ruth Young</i></u></p> <p>Ruth Young Chief Fiscal Officer, CDA Administration & Finance Division</p>	<p>Name: <u>Assessment Resolution and Hearing – CSA #2</u></p> <p>Address: <u>Road Zones of Benefit, Fiscal Year 2016/2017</u></p> <p>Phone: _____</p>
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CONTRACTING DEPARTMENT: CDA, Administration & Finance Division

Service Requested of Counsel/Risk: Review & Approve

Contract Term: _____ Contract/Amendment Amount: \$ 68,200.00

Compliance with Human Resources Requirements? Yes: N/A No: _____

Compliance verified by: N/A - Resolution

COUNTY COUNSEL: (must approve all contracts and MOUs)

Approved: Disapproved: _____ Date: 5/17/2016 By: J. Sun Pedro

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

Clean versions of the resolutions are attached.

EL DORADO COUNTY COUNSEL
 2016 MAY - 2 AM ID: 42

RISK MANAGEMENT: (All contracts and MOUs except boilerplate grant funding agreements)

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

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

RISK MANAGEMENT REVIEW NOT REQUIRED – PLEASE RETURN DIRECTLY TO COMMUNITY DEVELOPMENT AGENCY, ADMINISTRATION AND FINANCE DIVISION

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

Department(s): _____

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

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