

CONTRACT ROUTING SHEET

Date Prepared: 6/2/16

Need Date: ASAP

PROCESSING DEPARTMENT:

Department: Sheriff's Office

CONTRACTOR:

Name: El Dorado County Superior Court

Dept. Contact: Kelley Golden *KG*

Address: _____

Phone #: 530-621-5657

Phone: _____

Department: _____

Head Signature: *Jon DeV...* 6/2/16

CONTRACTING DEPARTMENT: Sheriff's Office

Service Requested: Funding Agreement for Security Services in the El Dorado County Courts

Contract Term: 07/01/16 - 06/30/17

Contract Value: _____

\$3,860,370.00

Compliance with Human Resources requirements? Yes: _____ No: _____

N/A

Compliance verified by: _____

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

Approved:

Disapproved: _____

Date: _____

By: _____

Approved: _____

Disapproved: _____

Date: _____

By: _____

6/9/16 - mail to J. DeVille with request to correct ^{improperly} sentence of pg. 2.

EL DORADO COUNTY COUNSEL
2016 JUN - 8 PM 1:06

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved:

Disapproved: _____

Date: _____

By: _____

Approved: _____

Disapproved: _____

Date: _____

By: _____

EDC HR/RISK
25 JUN 25 PM 04:00

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

Departments: _____

Approved: _____

Disapproved: _____

Date: _____

By: _____

Approved: _____

Disapproved: _____

Date: _____

By: _____