

CONTRACT ROUTING SHEET

Date Prepared:	02/01/2016	Need Date:	02/03/2016
PROCESSING DE Department: Dept. Contact: Phone #: Department Head Signature:	Elections Linda Webster X 7483	CONTRACTO Name: N/A Address: Phone:	
Service Requeste Contract Term: _I	Human Resources requirement	_ Contract Value: s? Yes:	\$0.00 No: X
Approved: Approved:	SEL: (Must approve all contrac Disapproved:	ts and MOU's) Date:2/2/16	By: DLWW. Course
	D TO RISK MANAGEMENT. THANK IENT: (All contracts and MOU' Disapproved: Disapproved:		ant funding agreements) By: By:
OTHER APPROVED Departments: Approved: Approved:	/AL: (Specify department(s) pa	articipating or directly a Date: Date:	affected by this contract). By: By: