

## CONTRACT ROUTING SHEET

Contract #: 216-S0910

30/08 Date Prepared: **Need Date:** CTOR:

Legalese Attorney Service Anc. PROCESSING DEPARTMENT: CONTRACTOR: CAO/Proc. & Contracts Department: Name: Address: 1754 36<sup>th</sup> Street Dept. Contact: Dan Lynch Phone #: 5180 Sacramento, CA 958160 Department 916-453-2860 Phone: Head Signature: **CONTRACTING DEPARTMENT:** CAO - Procurement & Contracts Service Requested: Process Service - Countywide Contract Term: 3 Years Contract Value: \$200,000.00 Compliance with Human Resources requirements? Yes: No: Compliance verified by: **COUNTY COUNSEL:** (Must approve all contracts and MOU's) Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: 7/31/08 By: D.L. Industron Approved: Disapproved: Date: By: PLEASE FORWARD TO RISK MANAGEMENT. THANKS! RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agree Disapproved: Approved: Date: By: OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract). Departments: Disapproved: Approved: Date: By: Approved: Disapproved: Date: Ву: