## CONTRACT ROUTING SHEET

| Date Prepared:     | 01/03/17                                     | Need Date: 01/0                 | 4/17                  |
|--------------------|--|---------------------------------|-----------------------|
| PROCESSING DI      | EPARTMENT:                                   | CONTRACTOR:                     |                       |
|                    | Board of Supervisors                         | Name: N/A                       |                       |
| Dept. Contact:     |  | Address:                        |                       |
| Phone #:           | 5592   |                                 |                       |
| Department         | 1000   | Phone:                          |                       |
| Head Signature:    | June & Athorn                                |                                 |                       |
|                    |  |                                 |                       |
| CONTRACTING        | DEPARTMENT:                                  |                                 |                       |
|                    | d: Resolution review - BOS                   | 2017 calendar change star       | t time to 9:00        |
| Contract Term:     |  | Contract Value:                 | \$0.00                |
| Compliance with I  | Human Resources requirement                  | ts? Yes:                        | No:                   |
| Compliance verifie |  |                                 |                       |
| COUNTY COUNS       | العادة (Must approve all contrac             | ets and MOU's)                  |                       |
|                    | Disapproved:                                 |                                 | By:                   |
| Approved:          | Disapproved:                                 | Date:                           | By:                   |
|                    |  |                                 |                       |
| A DE PARISONA      |  |                                 |                       |
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|                    | supplies a comment of the leading states     |                                 |                       |
|                    |  |                                 | The second second     |
|                    |  |                                 |                       |
|                    | TO RISK MANAGEMENT. THANK                    |                                 | unding agraements)    |
| Approved:          | ENT: (All contracts and MOU'<br>Disapproved: | Date:                           | By:                   |
| Approved:          | Disapproved:                                 | Date:                           | By:                   |
| Approved.          | Bioappiovoa.                                 | Bato.                           | _ by.                 |
|                    |  |                                 |                       |
|                    |  |                                 |                       |
|                    |  |                                 |                       |
|                    |  |                                 |                       |
|                    |  |                                 |                       |
| OTHER APPROV       | AL: (Specify department(s) pa                | articinating or directly affect | red by this contract) |
| Departments:       | AL. (Opcony department(s) po                 | artioipating or uneous aneon    | ou by this contract.  |
| Approved:          | Disapproved:                                 | Date:                           | By:                   |
| Approved:          | Disapproved:                                 | Date:                           | By:                   |
|                    |  |                                 |                       |
|                    |  |                                 |                       |

Rev. 12/2000 (GS-GVP)