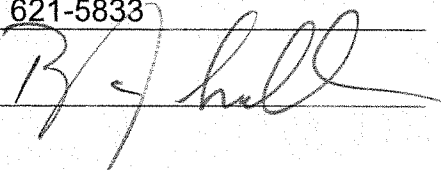


CONTRACT ROUTING SHEET

Date Prepared: 5/24/17

Need Date: BOS 6/6/17

PROCESSING DEPARTMENT:

Department: CAO Facilities
Dept. Contact: Kevin Gilliland
Phone #: 621-5833
Department Head Signature: 

CONTRACTOR:

Name: State of Ca. (SB 81)
Address: _____
Phone: _____

CONTRACTING DEPARTMENT: CAO Facilities / Probation

Service Requested: SB Funding administered by BSCC. Funding has been designated for the purpose of construction a local youth offender rehabilitative facility. Legal review of the Project Delivery & Construction Mgmt agreement.

Contract Term: Termination upon construction completion Contract Value: \$1.2M (GF) & \$9.6M State Funding

Compliance with Human Resources requirements? Yes: NA No: _____
Compliance verified by: NA

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

Approved: Disapproved: _____ Date: 5/25/17 By: for
Approved: _____ Disapproved: _____ Date: _____ By: _____

Refer to memo attached to the blue route on the prior review of the form documents.

EL DORADO COUNTY COUNSEL
2017 MAY 24 PM 3:35

PLEASE FORWARD TO RISK MANAGEMENT. NA

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

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

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

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