

CONTRACT ROUTING SHEET

Date Prepared: 6/4/15

Need Date: 7/1/15

PROCESSING DEPARTMENT:

Department: Sheriff's Office
Dept. Contact: Tania Donnelly
Phone #: 621-6636
Department
Head Signature: *[Signature]* 6/24/15

CONTRACTOR:

Name: US Forest Service
Address: _____
Phone: _____

CONTRACTING DEPARTMENT: Sheriff

Service Requested: Review of Cooperative Agreement - Exhibits A & B
Contract Term: 10/1/14 - 12/31/2015 Contract \$37,000
Compliance with Human Resources requirements? Yes: N/A No: _____
Compliance verified by: _____

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

Approved: *[Signature]* Disapproved: _____ Date: 6/25/15 By: *[Signature]*
Approved: _____ Disapproved: _____ Date: _____ By: _____

Note: Differently hourly rates for Sgt and Deputy in:
Exhibit A and B involving different securities
Exhibit A \$75 hr deputy
Exhibit B \$46.16 hr per deputy, \$16924 overtime
Ex A A \$92 for Sgt
Ex B \$57.02 per deputy, \$553 overtime

*Done
7/1/15
T.D.*

RECEIVED
JUN 24 2015
El Dorado County Counsel

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

Approved: _____ Disapproved: _____ Date: 6/26/15 By: *[Signature]*
Approved: _____ Disapproved: _____ Date: _____ By: _____

No insurance certs needed.
nothing for Risk

15 JUN 26 PM 1:39
HUMAN RESOURCES DEPT.

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

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