

CONTRACT ROUTING SHEET

Date Prepared: 8/16/16 5/10/17

Need Date: ASAP

PROCESSING DEPARTMENT:

Department: Sheriff's Office
Dept. Contact: Kelley Golden
Phone #: 530-621-5657
Department Head Signature: [Signature]

CONTRACTOR:

Name: US Forest Service
Address: _____
Phone: _____

CONTRACTING DEPARTMENT: Sheriff's Office

Service Requested: Review of Cooperative Agreement - Exhibit A & B
Contract Term: 10/01/16 - 09/30/17 Contract Value: \$37,000.00
Compliance with Human Resources requirements? Yes: N/A No: _____
Compliance verified by: [Redacted]

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

Approved: ✓ Disapproved: _____ Date: 5/17/17 By: [Signature]
Approved: _____ Disapproved: _____ Date: _____ By: _____

EL DORADO COUNTY COUNSEL
2017 MAY 12 AM 10:42

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: _____ Disapproved: _____ Date: 5-18-17 By: [Signature]
Approved: _____ Disapproved: _____ Date: _____ By: [Signature]

AMB:37 HR/RM MAY 18 '17

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

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