
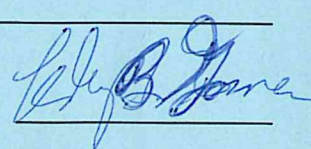


CONTRACT ROUTING SHEET

Date Prepared: 12/21/16Need Date: 12/22/16**PROCESSING DEPARTMENT:**Department: CAODept. Contact: Creighton AvilaPhone #: Ext. 5153Department: Head Signature: **CONTRACTOR:**Name: Address: Phone: **CONTRACTING DEPARTMENT:** CAOService Requested: Review agreement with CAL FIRE for a tree mortality grantContract Term: 3/15/19 Contract Value: \$0.00Compliance with Human Resources requirements? Yes: No: Compliance verified by: **COUNTY COUNSEL:** (Must approve all contracts and MOU's)Approved:  Disapproved: Date: 12/22/16 By: Approved: Disapproved: Date: By:

** Confidential legal advice in separate memo.*

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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: