

RUSH

Contract #: 264-S1411 AMD II

CONTRACT ROUTING SHEET

Date Prepared: September 20, 2016Need Date: ASAP – BOS Date 10/25**PROCESSING DEPARTMENT:**Department: Procurement & ContractsDept. Contact: Ashley WellsPhone #: x5804

Department: _____

Head Signature: whf**CONTRACTOR:**Name: York Risk ServicesAddress: One Upper Pond Rd, Bldg F, 4th FlParsippany, NJ 07054Phone: 866-391-9675**CONTRACTING DEPARTMENT:** Risk ManagementService Requested: Workers Comp Claim AdministrationContract Term: Four (4) Years Contract Value: \$1,121,927.80

Compliance with Human Resources requirements? Yes: _____ No: _____

Compliance verified by: N/A**COUNTY COUNSEL:** (Must approve all contracts and MOU's)Approved: X Disapproved: _____ Date: 9/22/16 By: [Signature]

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

EL PASO COUNTY COUNSEL
2016 SEP 21 AM 11:06

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)Approved: ✓ Disapproved: _____ Date: 9-23-16 By: [Signature]

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

EMAILED FOR ENDS 9/20/16. JWW.**OTHER APPROVAL:** (Specify department(s) participating or directly affected by this contract).

Departments: _____

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

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