CONTRACT ROUTING SHEET

Date Prepared:	03/13/14	Need Date:	04/14/14	
PROCESSING DE Department: Dept. Contact: Phone #: Department Head Signature:	Sheriff's Office Tania Donnelly 621-6636 2-20-14	Address: [GTP Investme Dept 3329,	IL 60132-3329
	d: Change of Ownership from Glob		C to GTP Inve	estments LLC
	Human Resources requirements?	ntract Value: Yes: _I	N/A	No:
Approved: Approved:		d MOU's) ate: 4/8//4	By:	Station ADO COUNTY COUNSEL MAR 21 AM 9: 13
RISK MANAGEM Approved: Approved: County prov	Disapproved: D	ate: 41311 ate:		- Cycry
				APR -3 AM 9
OTHER APPROV Departments:	AL: (Specify department(s) particip	eating or direct	ly affected by	S D
Approved:		ate:	By:	