## CONTRACT ROUTING SHEET

| Date Prepared: | 10/18/2017 |
| :--- | :--- |
| PROCESSING |  |
| DEPARTMENT: |  |
| Department: | Library |
| Dept. Contact: | Jeanne Amos |
| Phone \#: |  |
| Department |  |
| Head Signature: |  |
| CONTRACTING DEPARTMENT: Library |  |

Need Date: 11/1/2017
CONTRACTOR:
Name: El Dorado County Office of Education
Address: 6767 Green Valley Rd Placerville, CA 95667
Phone:

Service Requested: Review Agreement
Contract Term: $1 / 1 / 2018-6 / 30 / 2020$ Contract Value: $\$ 0.00$ $144,000.0$
Compliance with Human Resources requirements?
Yes: No:
Compliance verified by: $\qquad$
COUNTY COUNSEL: (Must approve all contracts and MOU's)
Approved: $\quad V$ Disapproved: $\qquad$ Date: Approved: Disapproved: Date:
By:


By:


PLEASE FORWARD TO RISK MANAGEMENT. THANKS!


OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).
Departments:
Approved:
Disapproved:
Date:
By:
Approved:
Disapproved:
Date:
By:

