2/29/08		DANAMANADO
4/24/08		Contract #:
CONTRACT	ROUTING SI	HEET 08-17
PROCESSING DEPARTMENT: Department: Sheriff Dept. Contact: MARY Pierce Phone #: 5691 Department Head Signature: pu	CONTRACTOR: Name: ALPINE. Address: P.O. Po Markleville Phone: 530-694	x 278) , (A 96120
CONTRACTING DEPARTMENT: Compliance with Human Resources requirem Compliance verified by:	nents? Yes: No:	
COUNTY COUNSEL: (Must approve all con Approved: Disapproved: Disapprov	Date: 3/04/08 Date: 5/07/08	By: Vindella Season
See resupmented do	1063 REQUEST	CLAVENDER 3
BY PATTA		
RISK MANAGEMENT: (All contracts and MC Approved: Disapproved: Approved: Disapproved:	Date:	grant funding agreements) By: By:
OTHER APPROVAL (Specify department(s) participating or dire	ectly affected by this
Approved: Disapproved:	Date:	Ву:
Approved: Disapproved:		By: