

CONTRACT ROUTING SHEET

Date Prepared: 9/5/18

Need Date: For 9/18 BOS mtg.

PROCESSING DEPARTMENT:

Department: CAO
Dept. Contact: Sue Hennike
Phone #: 5577
Department: _____
Authorization: [Signature]

CONTRACTOR:

Name: N/A
Address: _____
Phone: _____

CONTRACTING DEPARTMENT: CAO

Service Requested: Review VHR Fee Resolution
Contract Term: _____ Contract Value: N/A
Compliance with Human Resources requirements? Yes: _____ No: _____
Compliance verified by: _____

COUNTY COUNSEL:

Approved: [Signature] Disapproved: _____ Date: 9-6-18 By: [Signature]
Approved: _____ Disapproved: _____ Date: _____ By: _____

with County Clerk email.

EL DORADO COUNTY COUNSEL
2018 SEP -5 PM 2:43