

CONTRACT ROUTING SHEET

Date Prepared: 12/17/18

Need Date: 1/10/19

PROCESSING DEPARTMENT:

Department: CDS/Planning & Building
Dept. Contact: CJ Freeland
Phone #: Ext. 5159
Department Head Signature: [Signature]

CONTRACTOR:

Name: _____
Address: _____
Phone: _____

CONTRACTING DEPARTMENT: CDS/ Planning and Building Department

Service Requested: Review and Approve Resolution for grant funding application
Contract Term: _____ Contract Value: _____
Compliance with Human Resources requirements? Yes: _____ No: x
Compliance verified by: _____

COUNTY COUNSEL: (Must approve all contracts and MOU's)

Approved: ✓ Disapproved: _____ Date: 1/11/2019 By: K. Markham
Approved: _____ Disapproved: _____ Date: _____ By: _____

For Board Hearing ~~11/14/17~~ 1-29-19

EL DORADO COUNTY COUNSEL
2019 DEC 17 PM 4:30

Please call C.J. Freeland at ext. 5159 when ready for pick up

RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)

Approved: ✓ Disapproved: _____ Date: 1/14/19 By: [Signature]
Approved: _____ Disapproved: _____ Date: _____ By: _____

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).

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

2:09 HR/RH JAN 11 '19