ORDINANCE ROUTING SHEET

Date Prepared:	05/02/19	Need Date:	05/07/19
PROCESSING DI Department: Dept. Contact: Phone: Department	EPARTMENT: Board of Supervisors Jim Mitrisin X5592	CONTRACTOR Name: Address: Phone:	OR:
Head Signature:	J. Harring	Org Code:	
CONTRACTING Service Requeste Contract Term:	DEPARTMENT: d: Review of Ordinance to re	peal section 8.08.0 Contract Value:	
COUNTY COUNS Approved:	Disapproved: Disapproved:	cts and MOU's) Date:	By: By:
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			72 6
STEVEN MICH.	ARTON CONTRACTOR OF STREET		70 -1
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HR APPROVAL: WILL BE REVIEWED THROUGH WORKFLOW

RISK MANAGEMENT: WILL BE REVIEWED THROUGH WORKFLOW

PLEASE CALL x____ FOR PICK-UP...THANKS!