

# NEW AGREEMENT CONTRACT ROUTING SHEET

Date Prepared: 05/01/19

Need Date: 05/08/19

**PROCESSING DEPARTMENT:**

Department: AUDITOR-CONTROLLER

Dept. Contact: Bob Toscano

Phone: X 5456

Department

Head Signature: *Keely for Joe Ham*

**CONTRACTOR:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Org Code: 0300000

**CONTRACTING DEPARTMENT:** Auditor-Controller

Service Requested: Please review annual Prop 4 limit Resolution

Contract Term: \_\_\_\_\_ Contract Value: \_\_\_\_\_

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

Approved: X Disapproved: \_\_\_\_\_ Date: 5/2/19 By: *Penny*

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

EL DORADO COUNTY COUNCIL  
2019 MAY -1 PM 3:29

**HR APPROVAL:** WILL BE REVIEWED THROUGH WORKFLOW

**RISK MANAGEMENT:** WILL BE REVIEWED THROUGH WORKFLOW

*5421*  
**PLEASE CALL X FOR PICK-UP...THANKS!**