Legistar #: <u>19-0874</u> \_\_\_\_\_

## Side Letter RESOLUTION ROUTING SHEET

Date Prepared: 5 13 19 Need Date: 5 10 19
PROCESSING DEPARTMENT:
Department: Human Resources
Dept. Contact Name: Misty Garcia Phone: ×5388
Department Head Signature
Requesting Department: Homan Resources Org Code: 0810000
Service Requested: Review Review
Description: Letter of Agreement - Local ) 2019 MAY 14 AM 7:21
COUNTY COUNSEL:
Approved: \( \text{Disapproved:} \text{Date: } \frac{5}{22}/19 \text{By: Stylen ! When !}
County Counsel Comments:  Approved as revised.

HR APPROVAL: N/A (Resolution)

RISK MANAGEMENT: N/A (Resolution)

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