

RESOLUTION ROUTING SHEET

Date Prepared: 9/17/19

Need Date: ASAP

PROCESSING DEPARTMENT:

Department: CAD, Comm Dev Finance/Admin
Dept. Contact: Becky Marton, CFO
Phone: 4008
Department _____
Head Signature: _____

CONTRACTOR:

Name: N/A
Address: _____
Phone: _____

Org Code: 3530300
Project String: 35300001-35ADMIN

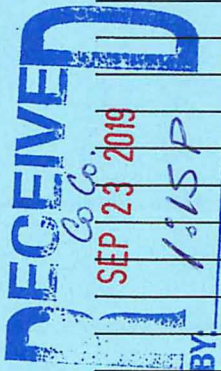
CONTRACTING DEPARTMENT: CAD, Cemeteries Div, ~~Administrative~~

Service Requested: Review & Approve

Contract Term: N/A Contract Value: Ø

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

Approved: Disapproved: _____ Date: 9-23-19 By: [Signature]
Approved: _____ Disapproved: _____ Date: _____ By: _____



HR APPROVAL: WILL BE REVIEWED THROUGH WORKFLOW

RISK MANAGEMENT: WILL BE REVIEWED THROUGH WORKFLOW

PLEASE CALL x _____ FOR PICK-UP... THANKS!

13930 - Jennifer Larson