

# CONTRACT ROUTING SHEET

Date Prepared: 12/16/19

Need Date: ASAP

**PROCESSING DEPARTMENT:**

Department: Sheriff  
Dept. Contact: Tania Donnelly TD  
Phone #: X6636  
Department: [Signature]  
Head Signature: [Signature] 12/19/19

**CONTRACTOR:**

Name: CA State Parks and Rec  
Address: Boating and Waterways  
Phone: \_\_\_\_\_

**CONTRACTING DEPARTMENT:** Sheriff

Service Requested: Boat Equipment Grant

Contract Term: When signed – November 30, 2020 Contract Value: \$100,000.00

Compliance with Human Resources requirements? Yes: \_\_\_\_\_ No: N/A

Compliance verified by: \_\_\_\_\_

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

Approved: ✓ Disapproved: \_\_\_\_\_ Date: 12/19/19 By: [Signature]  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

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

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

State Govt Agency Grant – No insurance

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

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

EDC COUNTY COUNSEL  
2019 DEC 17 AM 9:19