CONTRACT ROUTING SHEET				
Date Prepared:	03/13/20	Need Date:	ASAP	
PROCESSING D Department: Dept. Contact: Phone #: Department Head Signature:		CONTRACTO Name: Cal Address:		
Service Requeste Contract Term:	Human Resources requireme	inguage for Disaster Fun Contract Value:	\$0.00	
	SEL: (Must approve all contr Disapproved: Disapproved:	Date: 3/13/20	By: D. Lindoston	
			EDC COUNTY COUNSEL	
RISK MANAGEN	IENT: (All contracts and MO	U's except boilerplate gr	2020 MAR 13 Px12:50 ant funding agreements)	
Approved: Approved: Nothing for Ris	Disapproved: Disapproved: k	Date: Date:	By: By:	
OTHER APPROV	/AL: (Specify department(s)	participating or directly a	affected by this contract).	
Departments:				
Approved: Approved:	Disapproved: Disapproved:	Date: Date:	By: By:	

Contract #



RESOLUTION NO.

OF THE BOARD OF SUPERVISORS OF THE COUNTY OF EL DORADO

DESIGNATION OF APPLICANT'S AGENT RESOLUTION FOR NON-STATE AGENCIES

NOW, THEREFORE, BE IT RESOLVED that the **Board of Supervisors** (Governing Body)

OF THE	El Dorado County Sheriff's Office	
	(Name of Applicant)	

Sheriff______, OR
(Name or Title of Authorized Agent)

Sheriff's Lieutenant

nant_____, OR (Name or Title of Authorized Agent

THAT

Chief Fiscal Officer

(Name of Title of Authorized Agent)

is hereby authorized to execute for and on behalf of the named applicant, a public entity established under the laws of the State of California, this application to and to file it with the California Governor's Office of Emergency Services for the purpose of obtaining certain federal financial assistance under Public Law 93-288 as amended by the Robert T. Stafford Disaster Relief and Emergency Assistance Act of 1988, and/or state financial assistance under the California DisasterAssistance Act.

THAT the El Dorado County Sheriff's Office, a public entity established under the laws of the State of California hereby authorizes its agent(s) to provide to the Governor's Office of Emergency Services for all matters pertaining to such state disaster assistance the assurances and agreements required.

This is a universal resolution and is effective for all open and future disasters up to three (3) years following the date of approval below.

PASSED AND ADOPTED by the Board of Supervisors of the County of El Dorado at a regular meeting of said Board, held the _____ day of ______, 20_, by the following vote of said Board:

Attest: Kim Dawson Clerk of the Board of Supervisors Ayes: Noes: Absent:

By: _____

Deputy Clerk

Chair, Board of Supervisors

Member, Board of Supervisors