Legistar #: _____

RESOLUTION ROUTING SHEET

Date Prepared:	Need Date:
PROCESSING DEPARTMENT:	
Department: Human Resources	
Contact Name: Katie Lee	Phone: x5628
Email Address:	
Department Head Signature: Tameka Ushe	Digitally signed by Tameka Usher Date: 2020.04.09 14:08:52 -07'00'
Requesting Department: Human Resources	
Service Requested: Resolution Review	
Description: Merit System Services (MSS)/Approved Local Merit System Transition - Phase 2 Classification responsibility transferring from MSS to County and allocation changes, etc. as a result of such	
COUNTY COUNSEL:	
Approved: 🖌 Disapproved: Disapproved:	ate: 4/9/20
County Counsel Signature: Stephen Mansell Digitally signed by Stephen Mansell Date: 2020.04.09 15:22:45 -07'00'	
County Counsel Comments:	

HR APPROVAL: N/A (Resolution) RISK MANAGEMENT: N/A (Resolution)

PLEASE EMAIL CHANGES/APPROVAL TO DEPARTMENT CONTACT

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