

Agreement # N/A

Legistar # 20-0871

RESOLUTION ROUTING SHEET

Date Prepared: 06/26/2020

Need Date: 07/14/2020

PROCESSING DEPARTMENT:

Department: Public Defender

Dept. Contact: Ambria Hamilton

Phone: x5147

Department Head Signature: Teri Monterosso

CONTRACTOR:

Name: _____

Address: _____

Phone: _____

Org Code: 2300000

Project # _____

(if applicable): N/A

Funding Source: _____

CONTRACTING DEPARTMENT: Public Defender

Service Requested: Review resolution establishing PD Dept Fee Schedule and Processes

Description: _____

Contract Term: _____ Contract Value: _____

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

Approved:

Disapproved:

Date: 09/24/2020

By: Paula Frantz Digitally signed by Paula Frantz
Date: 2020.09.24 15:19:56
-0700

Approved:

Disapproved:

Date: _____

By:

HR APPROVAL: WILL BE REVIEWED THROUGH WORKFLOW

RISK MANAGEMENT: WILL BE REVIEWED THROUGH WORKFLOW

PLEASE EMAIL SIGNED DOCUMENT TO:

Thank you!