Legistar #: _____

RESOLUTION ROUTING SHEET

Date Prepared:	Need Date:
PROCESSING DEPARTMENT:	
Department: Human Resources Contact Name: <u>Misty Garcia or Jordan Meyer</u> Email Address: <u>misty.garcia@edcgov.us/jordan</u> .	
Department Head Signature: Joseph Carrue Requesting Department: Human Resources	
Service Requested: <u>Resolution Review</u>	
Description: Local 1 Letter of Agreement - Community Health Advocate RIF COUNTY COUNSEL:	
Approved: 🖌 Disapproved: D	ate: 5/18/2021
County Counsel Signature: Stephen L. Mansell Digitally signed by Stephen L. Mansell Date: 2021.05.18 09:07:13 -07'00'	
County Counsel Comments:	

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

PLEASE EMAIL CHANGES/APPROVAL TO DEPARTMENT CONTACT

21-0738 B 1 of 1