	CON	TRACT ROL	and the second	ct #: <u>039-S1011. Amendment</u> ET
Date Prepared:	07/14/2010		Need Date:	7/21/10
PROCESSING D Department:	EPARTMENT: Agriculture	· · · ·)R: rester's Co-Op Thomas nesbury
Dept. Contact: Phone #: Department Head Signature:	Myrna Tow 6647 Chaule Cauel William J. Steph	5 for lans	Address: 41 Gr	5 Colfax Ave ass Valley, CA 95945 30) 273-8326
Service Requeste Contract Term:	<mark>7/1/09-6/30/11</mark> Human Resource	for Contractor for Co		
Approved:	SEL: (Must appro Disapproved: Disapproved:	ove all contracts an Date: 1 Date:	d,MOU's) ////////////////////////////////////	By: DAT F
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RISK MANAGEN Approved:	IENT: (All contra Disapproved: Disapproved:	cts and MOU's exc Date: Date:	ept boilerplate gr	ant funding agreements) By:
			· ·	
	/AL: (Specify dep	partment(s) particip	ating or directly a	affected by this contract).
Departments: Approved: Approved:	Disapproved: Disapproved:	Date: Date:		By: By:
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