Originating Danartment	
Funding Source:	
Purpose of MOU:	
Amount of MOU:	
Term of MOU:	
	Approved as to Content
	(Elected Official or Department Head)
	Date:
	Administrative Services Department
	(Administrative Services Manager) Date:
	Board of County Commissioners Approved
	(Chair) Date approved:

Distributed:	
	Administrative Services Manager
Date Distrib	outed: