## GENESEE COUNTY BOARD OF COUNTY COMMISSIONERS REVIEW CHECKLIST

Department: Dept. Contact:			Document:  Phone:	
	Submit a c	completed copy of this form with docu	ıment when seeking Board	Chair signature.
me Pro	emorandum ocurement),	agenda item requires Board approval of understanding, it must be revier Risk Management, and Corporation Coval, you must re-submit your document to	wed by the Controller's ounsel. If changes are m	Office (Finance and
1.	Controller-F	-inance		
		This item requires an appropriation or	budget transfer.	
	This item does not require an appropriation or budget transfer and it has been reviewed and found to be in accordance with the County's budget and accounting practices.			
			Controller's Office	date
2.	Controller-F	<u>Procurement</u>		
	This transaction is subject to the Genesee County Administrative Control of Funds Regulations.			
	This transaction is in compliance with the Genesee County Purchasing Regulations.			
			Controller's Office	date
3.	Risk Manag	gement		
		nce, indemnity, and bond provisions cont scal obligations.	tained in this document are s	sufficient to meet the
			Risk Manager	date
4.	<u>Legal</u>			
	This docum	nent is approved as to form and legality.		
			Corporation Counsel	date
5.	<u>Departmen</u>	<u>t</u>		
or	-	- nent has been approved by roll call vote (	on	(date)
	This document has been approved by Resolution # 17			
	I certify that this document is the document approved by the above listed departments:			