

CONTRACT AMENDMENT ROUTING SHEET

Date Prepared: 11/09/2021

Need Date: 11/09/2021

PROCESSING DEPARTMENT:

Department: Transportation
Dept. Contact: Laura Schwartz
Phone: 621-6541
Department Head Signature: Laura Schwartz
Digitally signed by Laura Schwartz
Date: 2021.11.09 10:03:52 -08'00'

CONTRACTOR:

Name: West Valley, LLC
Address: _____
Phone: _____
Org Code: 3600000
Project String (if applicable): _____

CONTRACTING DEPARTMENT: Transportation

Service Requested: Review
Description: Review Amendment I to funding credit and reimbursement agreement
Contract Term: N/A Contract Value: N/A

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

Approved: Disapproved: Date: 11/09/2021 By: Paula Frantz
Approved: Disapproved: Date: _____ By: _____
Digitally signed by Paula Frantz
Date: 2021.11.09 13:40:10 -08'00'

COUNSEL -- PLEASE FORWARD TO HR AND RISK MANAGEMENT -- THANKS!

HR APPROVAL:

Compliance with Human Resources requirements? Yes: No:
Compliance verified by: _____

RISK MANAGEMENT APPROVAL: (all contracts & MOU's except boilerplate grant funding contracts)

Approved: Disapproved: Date: _____ By: _____
Approved: Disapproved: Date: _____ By: _____

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).

Departments: _____
Approved: Disapproved: Date: _____ By: _____
Approved: Disapproved: Date: _____ By: _____

PLEASE EMAIL SIGNED DOCUMENT TO:

THANK YOU!