

# CONTRACT ROUTING SHEET

Date Prepared: 08/7/2012

Need Date: \_\_\_\_\_

**PROCESSING DEPARTMENT:**

Department: County Counsel  
Dept. Contact: Louis B. Green  
Phone #: 621-5770  
Department  
Head Signature: *Louis B Green*

**CONTRACTOR:**

Name: Abbott & Kindermann, LLP  
Address: 2100 - 21<sup>st</sup> Street  
Sacramento, CA 95818  
Phone: \_\_\_\_\_

**CONTRACTING DEPARTMENT:** County Counsel

Service Requested: Legal Representation re General Plan Amendments  
Contract Term: \_\_\_\_\_ Contract Value: \$ \_\_\_\_\_  
Compliance with Human Resources requirements? Yes: \_\_\_\_\_ No: \_\_\_\_\_  
Compliance verified by: \_\_\_\_\_

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

Approved: *[check]* Disapproved: \_\_\_\_\_ Date: 8/7/12 By: *[Signature]*  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

**RISK MANAGEMENT:** (All contracts and MOU's except boilerplate grant funding agreements)

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: \_\_\_\_\_