

Agreement # n/a

Legistar # n/a

AGREEMENT CONTRACT ROUTING SHEET

Date Prepared: 07/07/2022

Need Date: 07/22/2022

PROCESSING DEPARTMENT:

Department: CAO

Dept. Contact: Jennifer Franich

Phone: x7539

Department Head Signature: Jennifer Digitally signed by Jennifer
Date: 2022.07.07 15:54:09
-07'00'

CONTRACTOR:

Name: n/a

Address: _____

Phone: _____

Org Code: 0200000

Project #
(if applicable): _____

Funding Source: _____

CONTRACTING DEPARTMENT: CAO

Service Requested: Review Resolution for fee increase

Description: Impact Fees increase for Mosquito Fire

Contract Term: n/a Contract Value: _____

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

Approved: Disapproved: Date: 07/21/2022 By: David A. Livingston Digitally signed by David A. Livingston
Date: 2022.07.21 17:26:47 -07'00'

Approved: Disapproved: Date: _____ By: _____

As revised.

