REVIEW AND AP	PROVAL REQUESTI	D FOR:				_	
Contract	Amendment [Resolution	Ordin	ance	Policy	Other	
County Counsel REVIEW ROUTING SHEET							
Date Prepared: 10/28/25			Need Date: 11/6/25				
PROCESSING DEI	PARTMENT						
Dept Contact:	prone: 5518 ept. Signature: Digitally signed by Joseph Carruesco Date: 2025.10.29 14:58:52-0700			Org Code: 0800000 Funding Source:			
Phone: Signature:				PL String: Legistar #: Pending			
Title: _I CONTRACT INFO			Legistai #.	<u>r onding</u>			
CONTRACT #: Contracting Department:			CONTRACT AMENDMENT #:				
	ng Department: or/Vendor Name: _						
Contract Term: Co							
Note - HR & RISK review will take place during Fenix Contract workflow - amendments see below.							
TITLE / SU NUMBER (OLUTION/POLICY BJECT: (If Assigned): ID ADDITIONAL Notal Services Supe	OTES FOR COUN	TY COUNSE				
and delete one	(1) Supervising A	ccountant Aud	itor				
Approved Approved COMMENTS	Disapproved Disapproved	Date: 10/30/25 Date:				Digitally signed by Stephen L. Mansell Date: 2025.10.30 11:34:14 -07'00'	
•	L vith Human Resour erified by: (AL d Disapprove	d Date:		Ву:			