REVIEW AND APPROVAL REQUESTED FOR:

☐ Contract ☐ Amendment ☐ Resolution ☐ Ordinance ☑ Policy ☐ Other

County Counsel
REVIEW ROUTING SHEET

Date Prepared: 5/29/26 Need Date: 6/26/26

PROCESSING DEPARTMENT

Department: CAO
Dept Contact: Alison Winter
Phone: x6765
Dept. Signature: Alison Winter Digitally signed by Alison Winter Date: 2026.05.29 14:59:23 -07'00'
Title: Principal Management An

Org Code: 0200000
Funding Source: GF
PL String: _____
Legistar #: _____

CONTRACT INFORMATION

CONTRACT #:_____ CONTRACT AMENDMENT #:_____

Contracting Department: _____
Contractor/Vendor Name: _____
Contract Term:_____ Contract Value:_____

Note - HR & RISK review will take place during Fenix Contract workflow - amendments see below.

ORDINANCE/RESOLUTION/POLICY INFORMATION

TITLE / SUBJECT: Policy A-4 County Legislative Policy Updates
NUMBER (If Assigned):_____

DESCRIPTION AND ADDITIONAL NOTES FOR COUNTY COUNSEL

Please review the revisions to the County Legislative Policy.

COUNTY COUNSEL

Approved ☑ Disapproved ☐ Date: 6/30/26 By: David Livingston Digitally signed by David Livingston Date: 2026.06.30 15:52:29 -07'00'
Approved ☐ Disapproved ☐ Date: _____ By: _____

COMMENTS

Approved with changes

CONTRACT AMENDMENT ONLY

HR APPROVAL

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

RISK APPROVAL

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

COMMENTS