

Agreement # \_\_\_\_\_

Legistar # \_\_\_\_\_

# AGREEMENT CONTRACT ROUTING SHEET

Date Prepared: 04/15/2024

Need Date: 05/10/2024

## PROCESSING DEPARTMENT:

Department: Library  
Dept. Contact: Bryce Lovell  
Phone: x5546  
Department Head Signature: Bryce Lovell Digitally signed by Bryce Lovell  
Date: 2024.04.15 13:50:04  
-07'00'

## CONTRACTOR:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Org Code: 4300000  
Project # \_\_\_\_\_  
(if applicable): \_\_\_\_\_  
Funding Source: \_\_\_\_\_

## CONTRACTING DEPARTMENT:

Service Requested: Review and approve new Library and Museum Behavior Policy and Suspension Appeal form.

Description: \_\_\_\_\_

Contract Term: \_\_\_\_\_ Contract Value: \_\_\_\_\_

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

Approved:  Disapproved:  Date: 05/02/2024 By: Janeth SanPedro Digitally signed by Janeth SanPedro  
Date: 2024.05.02 10:13:38 -07'00'  
Approved:  Disapproved:  Date: \_\_\_\_\_ By: \_\_\_\_\_

with edits as noted - jds

HR APPROVAL: WILL BE REVIEWED THROUGH WORKFLOW

RISK MANAGEMENT: WILL BE REVIEWED THROUGH WORKFLOW

PLEASE EMAIL SIGNED DOCUMENT TO:

Thank you!