

**REVIEW AND APPROVAL REQUESTED FOR:**

☐ Contract ☐ Amendment ☒ Resolution ☐ Ordinance ☐ Policy ☐ Other

**County Counsel  
REVIEW ROUTING SHEET**

Date Prepared: 8/13/25

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

**PROCESSING DEPARTMENT**Department: Auditor-ControllerOrg Code: 0300000Dept Contact: Sonja Cook

Funding Source: \_\_\_\_\_

Phone: x5421

PL String: \_\_\_\_\_

Dept. Signature: Sonja Cook for Joe Harn  
Digitally signed by Sonja Cook for Joe Harn  
Date: 2025.08.13 10:29:42 -0700Legistar #: 25-1245Title: Administrative Analyst II**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: Resolution Determining Necessity to Incur Bonded Ind

NUMBER (If Assigned): \_\_\_\_\_

**DESCRIPTION AND ADDITIONAL NOTES FOR COUNTY COUNSEL**

Please review the attached Resolution.

**COUNTY COUNSEL**

Approved ☒ Disapproved ☐ Date: 8/15/25  
Approved ☐ Disapproved ☐ Date: \_\_\_\_\_

By: Janeth D. SanPedro Digitally signed by Janeth D. SanPedro  
Date: 2025.08.15 13:48:27 -07'00'  
By: \_\_\_\_\_

**COMMENTS****CONTRACT AMENDMENT ONLY****HR APPROVAL**Compliance with Human Resources requirements? Yes: ☐ No: ☐

Compliance verified by: \_\_\_\_\_

**RISK APPROVAL**

Approved ☐ Disapproved ☐ Date: \_\_\_\_\_  
Approved ☐ Disapproved ☐ Date: \_\_\_\_\_

By: \_\_\_\_\_  
By: \_\_\_\_\_

**COMMENTS**