

REVIEW AND APPROVAL REQUESTED FOR:

Contract Amendment Resolution Ordinance Policy Other

County Counsel
REVIEW ROUTING SHEET

Date Prepared: 11/5/25Need Date: 11/20/25**PROCESSING DEPARTMENT**

Department: CAO
 Dept Contact: Tara Stout
 Phone: x5401
 Dept. Signature: Tara Stout
Digitally signed by Tara Stout
Date: 2025.11.05 12:40:18 -08'00'
 Title: _____

Org Code: 0200000
 Funding Source: _____
 PL String: _____
 Legistar #: 25-1884

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: Fee Waiver Policy Revision
 NUMBER (If Assigned): B-2

DESCRIPTION AND ADDITIONAL NOTES FOR COUNTY COUNSEL

Review revisions to the B-2 Fee Waiver policy & fee waiver request form

COUNTY COUNSEL

Approved Disapproved Date: 12/15/25
 Approved Disapproved Date: _____

By: David Livingston Digitally signed by David Livingston
Date: 2025.12.15 16:44:32 -08'00'
 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