

Agreement # _____

Legistar # _____

AGREEMENT CONTRACT ROUTING SHEET

Date Prepared: 8/28/19

Need Date: ~~_____~~ As soon as possible

PROCESSING DEPARTMENT:

CONTRACTOR:

Department: CAO
Dept. Contact: Creighton Avila
Phone: 5153
Department Head Signature: [Signature]

Name: _____
Address: _____
Phone: _____
Org Code: _____
Project String (if applicable): _____
Funding Source: _____

CONTRACTING DEPARTMENT:

Service Requested: Resolution of intention to create a cemetery zone of interest.
Description: _____
Contract Term: _____ Contract Value: _____

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

Approved: Disapproved: _____ Date: 8/29/19 By: RA
Approved: _____ Disapproved: _____ Date: _____ By: _____

Changes emailed to CAO

RECEIVED
AUG 27 2019
BY: _____

HR APPROVAL: WILL BE REVIEWED THROUGH WORKFLOW

RISK MANAGEMENT: WILL BE REVIEWED THROUGH WORKFLOW

PLEASE EMAIL FOR PICK-UP cda-csu@edcgov.us Thank you!