

**REVIEW AND APPROVAL REQUESTED FOR:**

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

**County Counsel  
REVIEW ROUTING SHEET**

Date Prepared: 7/8/25Need Date: 7/22/25**PROCESSING DEPARTMENT**

Department: CAO - P&C  
Dept Contact: Ross Garner  
Phone: 530-621-6539  
Dept. Signature: Tyler Prince  
Title: Sr Admin Analyst

Org Code: 0640450  
Funding Source: ACO  
PL String: TBD  
Legistar #: 25-0896

**CONTRACT INFORMATION**CONTRACT #: 9701

CONTRACT AMENDMENT #: \_\_\_\_\_

Contracting Department: CAO - FacilitiesContractor/Vendor Name: LionakisContract Term: 5 yearsContract Value: \$2,333,904.00

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

**ORDINANCE/RESOLUTION/POLICY INFORMATION**

TITLE / SUBJECT: \_\_\_\_\_

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

**DESCRIPTION AND ADDITIONAL NOTES FOR COUNTY COUNSEL**Review and ApproveA&E for Tenant Improvements for HHSA and PHF**COUNTY COUNSEL**

Approved ☒ Disapproved ☐ Date: 7/10/25  
Approved ☐ Disapproved ☐ Date: \_\_\_\_\_

By: Ted Wood

Digitally signed by Ted Wood  
Date: 2025.07.10 11:48:42 -07'00'

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

**COMMENTS** Approved as to form with edits - TDWCoco's edits have been incorporated - Tyler P.**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** \_\_\_\_\_