

REVIEW AND APPROVAL REQUESTED FOR:

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

**County Counsel
REVIEW ROUTING SHEET**

Date Prepared: 3/4/25Need Date: 3/25/25**PROCESSING DEPARTMENT**

Department: Sheriff
Dept Contact: Katie Cruickshank
Phone: 530-621-5609
Dept. Signature: Monica Ferguson Digitally signed by Monica Ferguson
Date: 2025.03.10 13:42:08 -07'00'
Title: _____

Org Code: 2420
Funding Source: _____
PL String: _____
Legistar #: 25-0598

CONTRACT INFORMATION

CONTRACT #: _____ CONTRACT AMENDMENT #: _____

Contracting Department: Sheriff's OfficeContractor/Vendor Name: Cal OES

Contract Term: _____ Contract Value: _____

*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**DESIGNATION OF APPLICANT'S AGENT RESOLUTION FOR NON-STATE AGENCIES**

COUNTY COUNSEL

Approved ☒ Disapproved ☐ Date: 3/19/25
Approved ☐ Disapproved ☐ Date: _____

By: Stephen L. Mansell Digitally signed by Stephen L. Mansell
Date: 2025.03.19 15:48:41 -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
