

CONTRACT ROUTING SHEET

Date Prepared: 3/24/15

Need Date: 3/27/15

PROCESSING DEPARTMENT:

Department: Auditor-Controller
Dept. Contact: Joe Harn
Phone #: 5476 call Keely 5421
Department
Head Signature: Kjivaman for Joe Harn

CONTRACTOR:

Name: N/A
Address: _____
Phone: _____

CONTRACTING DEPARTMENT: CFD 2001-1 Promontory 3rd Series

Service Requested: Review Reso authorizing the issuance of special tax and fiscal agent agmt
Contract Term: _____ Contract Value: \$30,000,000
Compliance with Human Resources requirements? Yes: _____ No: _____
Compliance verified by: Prior review - specialized services. BOS approved.

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

Approved: Disapproved: _____ Date: 3/25/2015 By: J. Sam DeLo
Approved: _____ Disapproved: _____ Date: _____ By: _____

Minor changes in the Reso; Senior Lien Fiscal Agent Agmt (pp. 1, 3, 10, 27, 28, 31, 33 + 34) + Junior Lien Fiscal Agent Agmt (pp. 15, 10, 11, 19, 4, 5, 7)

CLERK OF COUNTY COUNCIL

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)

Approved: _____ Disapproved: _____ Date: _____ By: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____

Nothing for Risk to Review

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).

Departments:
Approved: Disapproved: _____ Date: _____ By: _____
Approved: BOS Nov 12, 2013 13-1432 Disapproved: _____ Date: _____ By: _____