

**REVIEW AND APPROVAL REQUESTED FOR:**

Contract  Amendment  Resolution  Ordinance  Policy  Other

**County Counsel**  
**REVIEW ROUTING SHEET**

Date Prepared: 1/15/26Need Date: 1/22/26**PROCESSING DEPARTMENT**

Department: Human Resources  
 Dept Contact: Misty Garcia  
 Phone: 5388  
 Dept. Signature: Joseph Carruesco Digital signature by Joseph Carruesco  
Date: 2026.01.15 09:53:32 -08'00'  
 Title: Director of HR

Org Code: 0800000  
 Funding Source: \_\_\_\_\_  
 PL String: \_\_\_\_\_  
 Legistar #: 26-0208

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

**DESCRIPTION AND ADDITIONAL NOTES FOR COUNTY COUNSEL**

TC MOU Reso.  
 \_\_\_\_\_  
 \_\_\_\_\_

**COUNTY COUNSEL**

Approved  Disapproved  Date: 1/15/26  
 Approved  Disapproved  Date: \_\_\_\_\_

By: Stephen L. Mansell Digital signature by Stephen L. Mansell  
Date: 2026.01.15 13:14:01 -08'00'

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

**COMMENTS** Approved as revised.  
 \_\_\_\_\_  
 \_\_\_\_\_

**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** \_\_\_\_\_