

**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  
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 Digitally signed 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: \_\_\_\_\_ By: \_\_\_\_\_  
Approved ☐ Disapproved ☐ Date: \_\_\_\_\_ By: \_\_\_\_\_

**COMMENTS** \_\_\_\_\_