Agreement # _____

Legistar # 21-0458

AGREEMENT
CONTRACT ROUTING SHEET

Date Prepared: 05/14/2021

Need Date: 05/18/2021

PROCESSING DEPARTMENT:

Department: Board of Supervisors
Dept. Contact: Kim Dawson
Phone: 530-621-5393
Department Head Signature: Kim Dawson Digitally signed by Kim Dawson Date: 2021.05.14 15:07:37 -07'00'

CONTRACTOR:

Name:
Address:
Phone:

Org Code:
Project # (if applicable):

Funding Source:

CONTRACTING DEPARTMENT:
Service Requested: Review Ordinance
Description: Ordinance repeal
Contract Term: Contract Value:

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

Approved:	☑	Disapproved:	☐	Date:	05/19/2021	By:	David A. Livingston Digitally signed by David A. Livingston Date: 2021.05.19 16:51:10 -07'00'
Approved:	☐	Disapproved:	☐	Date:		By:	

Move the third "whereas" clause to the beginning.

HR APPROVAL: WILL BE REVIEWED THROUGH WORKFLOW

RISK MANAGEMENT: WILL BE REVIEWED THROUGH WORKFLOW

PLEASE EMAIL SIGNED DOCUMENT TO:

Thank you!