

## CONTRACT ROUTING SHEET

PROCESSING DEPARTMENT:

| Department: | Community Development Agency |
| :--- | :--- |
| Division: | Administration \& Finance |
| Dept Contact: | Tom Meyer |
| Phone: | $\times 5911$ |
| Authorized Signature:Sandra Ewert <br> Sr. Dept. Analyst <br> Contracts \& Procurement Unit |  |

CONTRACTING DEPT: CDA
Service Requested: Review \& Approve
Contract Term: 3 Years
Contract/Amendment Amount: $\mathbf{\$ 2 0 0 , 0 0 0 . 0 0}$
Compliance with Human Resources Requirements:
Compliance verified by:
Contract Notification Sent: Ok Per:

CONTRACTOR:
Name: Kittelson \& Associates, Inc.
Address: 2110 K Street, Suite 22
Sacramento, California 95816
Phone: (916) 266-2190

Date Submitted: 6/15/2016
Date Needed: 6/22/2016
Funding Sources: General Fund/Capital improvement Fund

6/13/2016 HR Response Received: $\qquad$

COUNTY COUNSEL: (must approve all contracts and MOUs)

| Approved: | Disapproved: | Disapproved: |
| :--- | :--- | :--- |$\quad$| Date: | $\mathrm{By}:$ |
| :--- | :--- |
| Approved: | Date: |

Disapproved:


Date:
By: $\qquad$

## Please forward to Risk Management upon approval.

RISK MANAGEMENT: (All contracts and MOUs except boilerplate grant funding agreements
Approved: $\qquad$ Disapproved:
Date: $\qquad$ By: $\qquad$
Approved: $\qquad$ Disapproved: $\qquad$ Date: $\qquad$
By: $\qquad$

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract)
Approved: $\qquad$ Disapproved: $\qquad$ Date: $\qquad$ By: $\qquad$
Approved: $\qquad$ Disapproved: $\qquad$ Date: $\qquad$ By: $\qquad$

