

## CONTRACT ROUTING SHEET

## PROCESSING DEPARTMENT:

| Department: | Community Development Agency |
| :--- | :--- |
| Division: | Administration and Finance |
| Dept Contact: | Michele Weimer |
| Phone: | A 5670 |
| Authorized Signature: |  |

## CONTRACTING DEPT: DA

Service Requested: Review \& Approve
Contract Term: 4 Years
Contract/Amendment Amount: $\$ 30,000.00$
Compliance with Human Resources Requirements
Compliance verified by: Contract Notification Sent:
Ok Per: Misty Garcia
COUNTY COUNSEL: (must approve all contracts and MOUs)
Approved: Approved:
Disapproved:
Date: 7/28/17
By: Be Mueplus
By: $\qquad$

> Appurvod as to form.
> plecice see edits and comments on draft.

## Please forward to Risk Management upon approval.

RISK MANAGEMENT: (All contracts and NOUs except boilerplate grant funding agreements


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

