CONTRACT ROUTING SHEET

Date Prepared:	7/22/815	Need Date: 8/15/15		
PROCESSING DEPARTMENT: Department: Dept. Contact: Phone #: Department Head Signature:	Sheriff's Office Tania Donnelly 621-6636	CONTRA Name: Address: Phone:	Global Tower Ass	
	d: Change of Ownership fro			
Contract Term:	11/1/15 = 10/31/16	Contract Value month with 3% each year	7.	whities.
Compliance with I	Human Resources requirement and by:	nts? Yes:	N/A No	DE OR ALLO
Approved: Approved: A	Disapproved: Disap	Date: 9/15/ Date: Towe American Towe	By: Corp 7 500 Mer out 15 519 - 9 21 15 Fen	
Men prom	veterence in Notices,	sume reversion	Obelety for u	tility connector
Approved:	ENT: (All contracts and MOUDISAPPROVED: Disapproved: Vides evidence of self-insured	Date: 9 01	ate grant funding ag	greements) N/A
OTHER APPROV	'AL: (Specify department(s)	participating or dire	ectly affected by this	s contract).
Departments:Approved:	Disapproved: Disapproved:	Date:	By:By:	

Rev. 12/2000 (GS-GVP)