CONTRACT AMENDMENT ROUTING SHEET

Date Prepared:		Need Date:	
PROCESSING DE Department: Dept. Contact: Phone: Department Head Signature: CONTRACTING I	Rady Leitner X5150 Michele Weimer Procurement & Contracts Manager	CONTRACT Name: Address: Phone: Org Code: Project Strir (if applicable)	C. Toeller Consulting 608 Ruscello Court El Dorado Hills, CA 95762 916.337.7575 0640450
Service Requeste	d: Review & Approve roject Management Services	_ Contract Value	e: \$200,000
Approved:	EL: (must approve all contraction Disapproved: Disapproved:	Date:	By: 100 By: 10
HR APPROVAL:	DUNSEL PLEASE FORWARD TO		IAGEMENT THANKS!
Compliance verifie	the party of the same and the same and the	7/19	Taller in trainer trainer - Andrews -
Approved: \checkmark	ENT APPROVAL: (all contraction of the contraction o	Date:3/2	pt boilerplate grant funding contracts) 7/19 By: By:
			PM3:52 HR/RM MAR 26'19
OTHER APPROV Departments: Approved:	AL: (Specify department(s) pa	articipating or dire Date:	ectly affected by this contract). By:
Approved:	Disapproved:	Date:	By:

PLEASE EMAIL FOR PICK-UP cda-csu@edcgov.us Thank you!