**CONTRACT ROUTING FORM**

**Office of the General Counsel (OGC)**

|  |  |  |
| --- | --- | --- |
| Sent Date: |  | **(**If no date, OGC will insert the date it was received).  |
| Return by Date: |  | (Minimum of two weeks - additional research, discussion, clarification, etc. may extend this date) |

Contract Number (OGC will assign and send to originator)

*\*This number must be used at the beginning of subject line for all correspondence related to this contract. \**

**ALL CONTRACTS MUST HAVE A COMPLETED ROUTING FORM**

OGC will send contracts for Expenditure and Revenue to Purchasing for review.

OGC/Purchasing will send contracts to IT for review, if required.

**Include the following information for ALL submissions:**

|  |  |  |  |
| --- | --- | --- | --- |
| **From:** Department:  |  | Originator Name: |  |
|  Phone: |  | E-mail: |  |

 **Contract Information:**

|  |  |
| --- | --- |
| Type of Contract |  |
| [ ]  New  | [ ]  Amendment/Change Order | [ ]  Renewal  | [ ]  Termination |

|  |  |  |  |
| --- | --- | --- | --- |
| Effective Date: |   |  Funding Source Amount: |  |
| End Date: |  |  Funding Source Account #: |  |

|  |  |
| --- | --- |
| **Vendor/Parties:** |  |
| Address: |  |
| Phone: |  |  |
| E-mail: |  |  |

**Comments/Notes about this contract that will be helpful during review:**

|  |  |  |  |
| --- | --- | --- | --- |
|

|  |  |  |
| --- | --- | --- |
| [ ]  Originator: | Date:  | Signature: |

 |

**Send completed form to:** Office of the General Counsel: Cathy Sanchez, cathy.sanchez@colostate.edu, 549-2130

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**OGC will route to the following for approval:**

|  |  |  |
| --- | --- | --- |
| Please date and sign,then return to OGC | Date | Approval/Signature |
| [ ]  Purchasing |  |  |
| [ ]  IT Review |  |  |
| [ ]  Legal Review (OGC) |  |  |
| [ ]  Signature Authority |  |  |
| [ ]  Controller |  |  |

[ ]  Fully executed contract returned to Office of the General Counsel, Date