



**CITY MANAGER**  
**CITY MANAGER SIGNATURE REQUEST ROUTING FORM**

Rev: 13 | Revision Date: 09/29/2025

**SECTION 1 | SUMMARY INFORMATION**

Date: 11-24-25

Commission Agenda Item  Letter to the Commission (LTC)  Letter to External Stakeholder(s)  Other Document

Document Title/Purpose: CEA (Arlidge & Lagmore) Non-Profit Grant Agre.,  
2) Recognition to Leashed Mtgs, 3) Gravel Lease, 4) And. & Restated  
Dev. Agre.

Commission Meeting Date: 11-4-25 CAM #: 25-09103 Item #: 2-1

CAM attached:  Yes  No Action Summary Attached:  Yes  No CIP FUNDED:  Yes  No  
 Community Investment Plan (CIP) Project defined as having a life of at least 10 years and a cost of at least \$100,000 and shall mean improvements to real property (land, buildings, or fixtures) that add value and/or extend useful life, including major repairs such as roof replacement. Term "real property" includes land, real estate, realty, or real.

**SECTION 2 | REQUESTOR (CHARTER OFFICE/DEPARTMENT)**

Charter Office: CAO Router Name: Erica Keiper Ext: 6088

Department: \_\_\_\_\_ Router Name: \_\_\_\_\_ Ext: \_\_\_\_\_

Department Approval (Director/Chief): Name \_\_\_\_\_ Init \_\_\_\_\_ Date: \_\_\_\_\_

\*Return Document To: Erica Keiper Department: CAO Ext: 6088

\*REMINDER: Once review and signature at the last level of government (Federal, State, County) is complete, scan the final record copy and send to the City Clerk's Office.

Scan Date: \_\_\_\_\_ Attach Certified Resolution #: \_\_\_\_\_ Original form route to CAO:  Yes  No

**THE FOLLOWING SECTIONS ARE FOR CHARTER OFFICE USE ONLY**

**SECTION 3 | CITY ATTORNEY'S OFFICE (CAO):** CAO signed/routed Required  Yes  No

Is the attached Granicus document final?  Yes  No Number of Originals Attached: 5

Attorney's Name: Lynn Schomay Approved as to Form:  Yes  No Initials: [Signature]

Route to: Finance (if applicable) Date: \_\_\_\_\_ Route to: CCO Date: 11-24-25

**SECTION 4 | CITY CLERK'S OFFICE (CCO)**

City Clerk Office Receive and Scan Date: \_\_\_\_\_ Number of Originals: \_\_\_\_\_

Route to CMO Date: \_\_\_\_\_ Route to Mayor Date: \_\_\_\_\_

**SECTION 5 | CITY MANAGER'S OFFICE (CMO)**

LOG #: \_\_\_\_\_ Date Received: \_\_\_\_\_ Received From: \_\_\_\_\_

To CM/ACM:  R. Williams  C. Cooper  Y. Matthews  B. Rogers

Approved Init.: \_\_\_\_\_ for continuous routing to Rickelle Williams, City Manager/Executive Director

Disapproved: \_\_\_\_\_ Comments: \_\_\_\_\_

CMO Executive Assistant Route to: CCO | HR | OMB | Other: \_\_\_\_\_ Date: \_\_\_\_\_

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