

**AGREEMENT ROUTING INFORMATION SHEET**

To: \_\_\_\_\_ Date: \_\_\_\_\_

Department/Division Origination: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Telephone: \_\_\_\_\_

Authorizing Acct Mgr: \_\_\_\_\_

Funding Source/Account: \_\_\_\_\_

Amount: \_\_\_\_\_

Procurement/Support Services Contact: \_\_\_\_\_ Telephone: \_\_\_\_\_

Type of Agreement: \_\_\_\_\_ Services \_\_\_\_\_ Personal Services \_\_\_\_\_ Products

\_\_\_\_\_ Real Property (\_\_\_\_\_ lease \_\_\_\_\_ purchase/sale)

\_\_\_\_\_ Conveyance of \_\_\_\_\_  
(Real Property Interest)

\_\_\_\_\_ Other, description \_\_\_\_\_

Involved Parties: \_\_\_\_\_  
\_\_\_\_\_

Term: \_\_\_\_\_ Extensions? \_\_\_\_\_ Yes, type \_\_\_\_\_

\_\_\_\_\_ No

**To be completed by Procurement Services**

Chancellor Required/Approved Insurance Clause? _____ Yes _____ No
If no, explain insurance clause contained in agreement: _____ _____ _____
Indemnification Clause? _____ Yes _____ No, reason _____ _____
Inadequate Funding Early Termination Clause? _____ Yes _____ No, reason _____ _____