

Agreement # N/A

Legistar # \_\_\_\_\_

# AGREEMENT CONTRACT ROUTING SHEET

Date Prepared: 07/17/2024

Need Date: 07/31/2024

**PROCESSING DEPARTMENT:**

**CONTRACTOR:**

Department: DOT

Name: N/A

Dept. Contact: Jen Rimoldi

Address: \_\_\_\_\_

Phone: 530-621-7592

Phone: \_\_\_\_\_

Department Head Signature: 

Jennifer Rimoldi, Office Engineer

Org Code: 3620200

Project # \_\_\_\_\_

(if applicable): 36200000

Funding Source: Local

**CONTRACTING DEPARTMENT:** DOT

Service Requested: Review & Approve Disadvantaged Business Enterprise (DBE) Annual Submittal

Description: Caltrans DBE Annual Submittal

Contract Term: 1 yr Contract Value: \$ 0.00

**COUNTY COUNSEL:** (Must approve all contracts and MOU's)

Approved:  Disapproved:  Date: 7/18/2024 By: 

Approved:  Disapproved:  Date: \_\_\_\_\_ By: \_\_\_\_\_

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HR APPROVAL: ~~WILL BE REVIEWED THROUGH WORKFLOW~~

RISK MANAGEMENT: ~~WILL BE REVIEWED THROUGH WORKFLOW~~

PLEASE EMAIL SIGNED DOCUMENT TO: jennifer.rimoldi@edcgov.us

Thank you!