

Counsel please include this information in your billing description.	>	AGMT-	Legistar #: <u>14-1595</u>	P&C #:	
	>	Index Code: <u>306000</u>	Project #: <u>73360</u>	Charge To #: <u>73360 RW04</u>	
	>	Project	#73360 - Shoemake; Gastaldi; et al - Partially Executed EAA - APN# 089-060-		
	>	Description:	01		

CONTRACT ROUTING SHEET

PROCESSING DEPARTMENT:

Department: Community Development Agency
 Division: Transportation
 Dept Contact: Jeannette Lyon
 Phone: x5313
 Authorized Signature: *[Signature]*

Andrew S. Gaber, PE
 CDA-Transportation
 Deputy Director, DRE

CONTRACTOR:

Name: SHOEMAKE, GASTALDI, ET AL
 (APN# 089-060-01)
 Address: 542 Fairview Drive
 Placerville, CA 95667
 Phone:

Date Submitted: 11/17/2014

Date Needed: 12/2/2014

Funding Sources: HSIP AND RSTP FUNDS

CONTRACTING DEPT: Transportation Division

Service Requested: Review & Approve

Contract Term:

Contract/Amendment Amount: \$3,500.00

Compliance with Human Resources Requirements: Yes: _____ No: X

Compliance verified by: _____ Contract Notification Sent: _____ HR Response Received: _____

Ok Per:

COUNTY COUNSEL: (must approve all contracts and MOUs)

Approved: Disapproved: _____ Date: 11/18/14 By: *[Signature]*
 Approved: _____ Disapproved: _____ Date: _____ By: _____

EL DORADO COUNTY COUNSEL
 2014 NOV 18 PM 12:20

Please forward to Risk Management upon approval.

RISK MANAGEMENT: (All contracts and MOUs except boilerplate grant funding agreements)

Approved: _____ Disapproved: _____ Date: 11/19/14 By: *[Signature]*
 Approved: _____ Disapproved: _____ Date: _____ By: _____

Nothing for Risk

RISK MANAGEMENT DEPT.
 14 NOV 18 PM 4:21

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract)

Approved: _____ Disapproved: _____ Date: _____ By: _____
 Approved: _____ Disapproved: _____ Date: _____ By: _____