

# AGREEMENT CONTRACT ROUTING SHEET

**Date Prepared:** 07/16/2021

**Need Date:** 07/20/2021

**PROCESSING DEPARTMENT:**

**CONTRACTOR:**

Department: Transportation

Name: El Dorado County Community Health Center

Dept. Contact: Lindsay Tallman

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

Phone: x5367

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

Department Head Signature: Natalie Porter Digitally signed by Natalie Porter  
Date: 2021.07.16 16:03:20 -07'00'

Org Code: 3620250

Natalie Porter  
Supervising Civil Engineer

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

(if applicable): 36DR190007-36BILLABLE-36CE-36RR25

Funding Source: Developer funded

**CONTRACTING DEPARTMENT:** Transportation

Service Requested: Review and Approve

Description: El Dorado County Community Center Road Improvement Agreement

Contract Term: \_\_\_\_\_ Contract Value: \_\_\_\_\_

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

Approved:  Disapproved:  Date: 07/22/2021 By: Daniel Vandekoolwyk Digitally signed by Daniel Vandekoolwyk  
Date: 2021.07.22 16:18:20 -07'00'

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

My approval is contingent upon receipt of documentation from El Dorado Community Health Center validating that Terri Stratton has authority to sign this agreement, or agreements like it, on behalf of EDCHC.

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

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

**PLEASE EMAIL SIGNED DOCUMENT TO:**

**Thank you!**