

Counsel please include this information in your billing description.	>	Contract #: 15-31109	Legistar #: 17-0494	P & C #: #004-C1699
	>	Index Code: 305100	Lav Log #: 17-21492	Activity Code: 72310 A105I
	>	Project P & C #004-C1699		
	>	Description:		

CONTRACT ROUTING SHEET

PROCESSING DEPARTMENT:

Department: Department of Transportation
 Division: Transportation
 Dept Contact: Jennifer Rimoldi
 Phone: x7592
 Dept Head Signature: B. Franklin

Brian Franklin, P.E.
Office Engineer

CONTRACTOR:

Name: TBD
 Address: TBD
 TBD
 TBD

Phone: _____

CONTRACTING DEPT: Transportation Division

Service Requested: **Review & Approve**

Contract Term: _____

Contract/Amendment Amount: \$0.00

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

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

Ok Per: N/A

COUNTY COUNSEL: (must approve all contracts and MOUs)

Approved: ✓ Disapproved: _____ Date: 5/23/17 By: D. Livingston
 Approved: _____ Disapproved: _____ Date: _____ By: _____

2017 APR 27 AM 8:07
 CLACK COUNTY COUNSEL

Please forward to Risk Management upon approval.

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

Approved: ✓ Disapproved: _____ Date: 5-24-17 By: [Signature]
 Approved: _____ Disapproved: _____ Date: _____ By: _____

AM 11:25 HR/RM MAY 24 '17

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

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