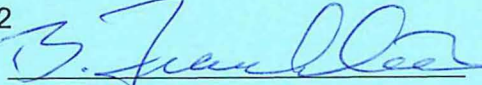


Counsel please include this information in your billing description.	>	Contract #: 18-31218	Legistar #: 18-0505	P & C #:
	>	Index Code: 305100	Lav Log #: 18-21552	Activity Code: 71363 A110I
	>	Project Description: Francisco Drive ADA Improvements Project		
	>	Contract Docs.		

CONTRACT ROUTING SHEET

PROCESSING DEPARTMENT:

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

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

Please forward to Risk Management upon approval.

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

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

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

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