

Counsel please include this information in your billing description.	>	-AGMT 13-53805	Legistar #: TBD	P&C #: NA
	>	Index Code: 305100	Project #: 77123	Charge To #: 77123 ED02
	>	Project Admin Negative Declaration for the Alder Drive at EID Canal - Bridge		
	>	Description: Replacement Project <span style="float: right;">ROUTING ONLY</span>		

## CONTRACT ROUTING SHEET

**PROCESSING DEPARTMENT:**

Department: Community Development Agency  
 Division: Transportation  
 Dept Contact: Sherrie Busby  
 Phone: x5984

**CONTRACTOR:**

Name: NA  
 Address:  
 Phone:

Authorized Signature: *Sherrie Busby* 10/22/13  
 Sherrie Busby  
 Administrative Services Officer  
 Contract Services Unit

EL DORADO COUNTY COUNSEL  
 2013 OCT 23 AM 9:50

**CONTRACTING DEPT: Transportation**

Service Requested: Review & Comment

Contract Term:

Contract/Amendment Amount: **\$0.00**

Compliance with Human Resources Requirements: Yes: \_\_\_\_\_ No: X

Compliance verified by: **Contract Notification Sent:** \_\_\_\_\_ **HR Response Received:** \_\_\_\_\_

**Ok Per: NA - Env Doc**

**COUNTY COUNSEL:** (must approve all contracts and MOUs)

Approved: ✓ Disapproved: \_\_\_\_\_ Date: 11/18/13 By: D. Livingston  
 Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

*\* SEE EMAIL RE: BIO-4.*  
*Comments incorporated GP.*

Please forward to <sup>CDA</sup> ~~\_\_\_\_\_~~ 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: \_\_\_\_\_