Counsel please include this information in your billing description.	Contract #: 12-53582 Legistar # 12-1360 P&C #
	Index Code: 305100 Charge To #: 71328
	Project Description: Silva Valley Parkway Interchange Project #71328

CONTRACT ROUTING SHEET

PROCESSING DEPARTMENT:

Department: Transportation
Dept. Contact: Matt Smeltzer
Phone: x5912
Department Head Signature:

Matt Smeltzer, P.E.
Deputy Director

CONTRACTOR:

Name: **EDHI, Ltd.**
A California L. P.
Address: 4364 Town Center Drive
Suite 213 EDH CA 95762
Phone: (916) 933-3013

CONTRACTING DEPARTMENT: Transportation

Service Requested of Counsel/Risk: **Review & Approve**

Contract Term: _____ **Contract Amount**: **$** _____

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

Compliance verified by: **Contract Notification Sent** **N/A**; **HR Response Received** _____:
OK per _____ **N/A** _____.

COUNTY COUNSEL: (must approve all contracts and MOUs)

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

Please Return Directly to DOT.

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).

Department(s): _____

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