

CONTRACT ROUTING SHEET

PROCESSING DEPARTMENT:

Department: Transportation
Dept. Contact: Tim Prudhel
Phone: x5974
Department Head
Signature: T. Prudhel 01-30-08
Tim C. Prudhel
Contract Services Officer

CONTRACTOR:

Name: Resolution Authorizing
DOT to Claim TDA Funds
Address: _____
Phone: _____

CONTRACTING DEPARTMENT: Transportation

Service Requested: Resolution

Contract Term: n/a Contract/Amendment Amount: \$ n/a

Compliance with Human Resources Requirements? Yes: N/A No: _____

Compliance verified by: N/A - Resolution

COUNTY COUNSEL: (must approve all contracts and MOUs)

Approved: Disapproved: _____ Date: 2/4/08 By: J. Beck
Approved: _____ Disapproved: _____ Date: _____ By: _____

ASSIGNMENT

DATE: 01/30/08
ATTORNEY: TRISH B.
DEPT/INDEXING: 36/650
BY: [Signature]

2008 JAN 30 PM 4:15
EL DORADO COUNTY COUNSEL
[Signature]

PLEASE REVIEW DIRECTLY TO DIT
Please forward to Risk Management upon approval.

Index Code: <u>302000</u>	User Code: <u>91100A</u>
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RISK MANAGEMENT: (All contracts and MOUs except boilerplate grant funding agreements)

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

RISK MANAGEMENT APPROVAL NOT REQUIRED

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

Department(s): _____

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