

Counsel please include this information in your billing description.	>	Contract #: 17-31164	Legistar #: 17-0730	P & C #:
	>	Index Code: 307142	Lav Log #: 17-21507	Activity Code: 93527
	>	Project Contract Documents for Construction of Crack Seal, Joint Seal & Mark Runway, Taxiways,		
	>	Description: Aprons & T-Hangar Taxilanes; Change Runway End ID Project		

CONTRACT ROUTING SHEET

PROCESSING DEPARTMENT:

Department: ~~CDG Department of Transportation~~
 Division: Administration and Finance
 Dept Contact: Sherrie Busby
 Phone: x5984
 Dept Head Signature: *Sherrie Busby*
 Sherrie Busby
 Administrative Services Officer

CONTRACTOR:

Name: TBD
 Address: TBD
 TBD
 TBD
 Phone:

CONTRACTING DEPT: CDA

Service Requested: **Review & Approve**

Contract Term: **30 Calendar Days**

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

Compliance with Human Resources Requirements: Yes: No:

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

Ok Per: Not Applicable - Public Works

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: _____