## CONTRACT ROUTING SHEET

Date Prepared: $\quad 7 / 18 / 11$
PROCESSING DEPARTMENT:
Department:
CAO/Procurement \& Contracts
Dept. Contact: Bonnie H. Rich
Phone\#: Department Head Signature:

Need Date: pame day
CONTRACTOR:
Name: George Miers \& Associates now known as Swatt Miers Architects
Address: 5845 Doyle Street
Suite 104
Emeryville, CA 94608
Phone: 510-985-9779

CONTRACTING DEPARTMENT: Transportation
Service Requested: Assignment and Assumption

Contract Term:

Contract Value:
Yes:
Compliance with Human Resources requirements? Compliance verified by:

COUNTY COUNSEL: (Must approve all contracts and MOU's)


## Please, Reharn to Prechasion

RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreendent of .
Approved:
Approved:
 Disapproved: Disapproved: $\qquad$
Date:
By:
Date:
 By:


OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).
Departments:
Approved:
Disapproved:
Approved:
Disapproved:

Date:
Date:
By:
By:

