

CONTRACT ROUTING SHEET

PROCESSING DEPARTMENT:

Department: Transportation
Dept. Contact: Janel Gifford
Phone: X5974
Department Head
Signature: Janel Gifford
Janel Gifford
Office Engineer/Contract Services Unit

CONTRACTOR:

Name: N/A
Address: _____
Phone: _____

CONTRACTING DEPARTMENT: Transportation

Service Requested: Disadvantaged Business Enterprise Goal & Methodology for FAA Funded Projects

Contract Term: N/A Contract Amount: \$ 0

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

Compliance verified by: N/A

COUNTY COUNSEL: (must approve all contracts and MOUs)

Approved: Joan Disapproved: _____ Date: 4/19/11 By: Lush Beck
Approved: _____ Disapproved: _____ Date: _____ By: _____

See comment to your question on memo

Please Return Directly To DOT.

Index Code: <u>306500</u>	User Code: <u>25000 A</u>
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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: _____