

## CONTRACT ROUTING SHEET

PROCESSING DEPARTMENT:
Department:
Dept. Contact:
Phone:
Department Head Signature:

| Transportation |
| :--- |
| Michele Smith |



Michele Smith Administrative Services Officer

CONTRACTOR:
Name: Siemens Industry, Inc.
Address: 371 Bel Marin Keys Blvd, \#200
Novato, CA 94949
415-884-3000

CONTRACTING DEPARTMENT: Transportation
Service Requested of Counsel/Risk: Review \& Approve Contract Term: 07/01/11-06/30/14
Compliance with Human Resources Requirements?
Amendment Amount: \$ 0.00
Compliance verified by: Contract Notification Sent 11/14/12; HR Response Received 11/14/12: OK per Mike Strella.
COUNTY COUNSEL: (must approve all contracts and MOUs)

Approved: Cons
Approved: $\qquad$ Disapproved: Disapproved:

Date: Date: $\qquad$ By:
 By: -

$\qquad$
$\qquad$

## Please forward to Risk Management upon approval.

RISK MANAGEMENT: (All contracts and NOUs except boilerplate grant funding agreements)


OTHER APPROVAL (Specify departments) participating or directly affected by this contract).
Departments):
Approved: __ Disapproved:
Approved: $\qquad$ Disapproved:

Date:
By:
$\square$ Date: By:

