Counsel please | Contract #: 12-53585 | Legistar # 12-1363 | P&C # | Index Code: 305100 | Charge To #:71328 | Charge To #:71328 | Project | Description: | Silva Valley Parkway Interchange Project #71328 | Proje

## CONTRACT ROUTING SHEET

PROCESSING DE Department: Dept. Contact: Phone: Department Head Signature:	Transportation	CONTRAC Name: Address: Phone:	
Service Requested Contract Term: Compliance with Hu	EPARTMENT: Transports of Counsel/Risk: Review  Iman Resources Requirement I by: Contract Notification OK per	& Approve Contract/Amerents? Yes:	ndment Amount: \$  N/A No: X  Response Received :
	L: (must approve all contr Disapproved: Disapproved:		By: Leak Bed Bed By:
RISK MANAGEME Approved:	Risk Management upon a  NT: (All contracts and MOU  Disapproved:  Disapproved:	Js except boilerplate Date: E	e grant funding agreements) By:
Department(s): Approved:		Date:B	y affected by this contract).  y:y:y:y: