Counsel please include this information in your billing description.

CONTRACT ROUTING SHEET

PROCESSING DEPARTMENT:
Departmen

Dept Contact: Bre Phone: x79 Authorized Signature:  CONTRACTING DEP Service Requested: Contract Term: Contract/Amendment	oartment of Transportation notan Ferry  O5  Steve Kooyman Acting Deputy Director/TPLD/Tahoe Eng T: Transportation Review & Approve  Amount: \$150,000.00 an Resources Requirements:	Yes: X No:	ponse Received:	
	Ok Per: <u>NA-Easement Acqui</u>	sition AGMT		P
COUNTY COUNSEL:	(must approve all contracts and	I MOUs)		000
Approved:	Disapproved:	Date: <u> </u>	By:By:	BO COUNTY
Please forward to DC	OT unon approval			COUNSEL COUNSEL
	Γ: (All contracts and MOUs excep	t beilerplete grant fun	ding agraements	
Approved:	Disapproved:	Date: <u>5/6//3</u>	By: Ozu	HUMBER SOLK
OTHER APPROVAL: Approved:	Disapproved:	Date:	Ву:	# 12: 05 tt)
Approved:	Disapproved:	Date:	By:	