				•			
Counsel please include this information in your billing description.	>	-13-53690	Legistar #:	13-0780		P&C #: 591-01311	
	2	Index Code: 306500	· Project #:	25000 A	Ċ	Charge To #: 25000 A	
		 Project Local Agency Disadvantaged Business Enterprise (DBE) Annual Submittal Description: Form (Exhibit 9B) for Federal Fiscal Year 2013-2014 					
		CONTRA	CT ROU	TING SF	IEE	ΞT	
PROCESSING	DE	PARTMENT:		CON	NTRA	ACTOR:	
Department:	I	Department of Transpo	ortation	Nan	ne:	California Department of	
Dept Contact:	Dent Contact: Sherrie Bushy					Transportation	

Address: Office of Local Assistance

Phone: x5984 Authorized Signature: Sherrie Busby Administrative Services Officer CONTRACTING DEPT: Transportation Service Requested: Review & Approve Contract Term: NA	703 B Street Marysville, CA 95901 Phone: (530) 741-5121
Contract/Amendment Amount: \$0.00	
Compliance with Human Resources Requirements:	Yes: No: _X
Compliance verified by: Contract Notification Ser	ent: HR Response Received: _
Ok Per: <u>NA - DBE Annua</u>	<u>ial Submittal</u>
COUNTY COUNSEL: (must approve all contracts	s and MOUs)
Approved: Disapproved:	Date: By:
Approved: Disapproved:	Date: By:
· · · · · · · · · · · · · · · · · · ·	

Please forward to DOT upon approval.

Dept Contact:

Sherrie Busby

RISK MANAGEMENT:	(All contracts and MOUs except boilerplate grant funding agreements
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Approved:	Disapproved:	Date:	By
Approved:	Disapproved:	Date:	By

Risk-Management Review Not Required.

OTHER APPROVAL:	(Specify department(s) participating or directly affected by this contract)					
Approved:	Disapproved:	Date:	Ву:			
Approved:	Disapproved:	Date:	By:			