## CONTRACT ROUTING SHEET

Date Prepared: 10/10/12
PROCESSING DEPARTMENT:
Department:
Dept. Contact:
Phone \#:
Department Head Signature:

EMD for DSD Michele Weimer 5670

CONTRACTING DEPARTMENT:
Development Services - CHARGE TO 345100
Service Requested: EIR for Central EDH development project
Contract Term: 3 years
Compliance with Human Resources requirements?
Contract/Amendment Value: 250919

Compliance verified by: Mike Strella
COUNTY COUNSEL: (Must approve all contracts and MOU's) Approved: Approved:

Disapproved:
Disapproved:


Date:

$\qquad$
Approved: Approved:


Disapproved:
Disapproved:
Date:
By:


OTHER APPROVAL: (Specify departments) participating or directly affected by this contract):Departments:
Approved:
Disapproved:
$\square \quad$ Date:
By:
Approved:
Disapproved:
By:

