include this information in your billing description. Index Code: 345000 Project #: GF-No Charge Charge To #: GF-No Charge To	Counsel please		-13-53781 /14-	53934	Legistar #:	12-1354		P&C #: 268-S1311					
Second Amendment to Agreement for Services 008D-A-12/13-BOS Preparation of an EIR for the Village of Marble Valley Specific Plan Project. CONTRACT ROUTING SHEET PROCESSING DEPARTMENT: Community Development Agency Division: Long Range Planning Object Contact: Michele Weimer Phone: Seroig Ewert Contract Services Unit CONTRACTING DEPT: Transportation Service Requested: Review & Approve Contract Term: Contract/Amendment Amount: On Pre: Mike Stralla Ok Per: Mike Stralla COUNTY COUNSEL: COUNTY COUNSEL: COUNTY COUNSEL: Disapproved: Disap	include this				Project #: GF-No Charge			Charge To #: GF-No Charge					
PROCESSING DEPARTMENT: Department: Community Development Agency Division: Long Range Planning Dept Contact: Michele Weimer Phone: x5670 Authorized Signature: X.	your billing description.	>										oject.	
Department: Community Development Agency Division: Long Range Planning Dept Contact: Michele Weimer			CONT	TRAC ⁻	T ROU	TING S	HE	ET					
Division: Long Range Planning Dept Contact: Michele Weimer Phone: x5670 Authorized Signature: Sandy Evert Contract Services Unit CONTRACTING DEPT: Transportation Service Requested: Review & Approve Contract Term: Contract/Amendment Amount: \$0.00 Compliance with Human Resources Requirements: Yes: X No: Compliance verified by: Contract Notification Sent: 04/24/2014 HR Response Received: 04/28/2014 Ok Per: Mike Stralls COUNTY COUNSEL: (must approve all contracts and MOUs) Approved: Contract Service Contract Service Stralls Disapproved: Date: By: ** SEC CRAMBERS To \$261-\$1311 ** SEC CRAMBERS To \$261-\$1311 ** Sec CRAMBERS To Disapproved: Date: By: ** Sec CRAMBERS	PROCESSING D)EF	PARTMENT:			CC	NTR	ACT	OR:				
Dept Contact: Michele Weimer	Department:	C	Community Dev	elopment	Agency	Na	me:	ICI	- Jones	& Stol	kes, In	IC.	
Phone: x5670 Authorized Signature: x. R. Loudt Sandy Evert Contract Services Unit CONTRACTING DEPT: Transportation Service Requested: Review & Approve Contract Term: Contract/Amendment Amount: \$0.00 Compliance with Human Resources Requirements: Yes: X No: Compliance with Human Resources Requirements: Yes: X No: Compliance with Human Resources Requirements: O4/24/2014 HR Response Received: 04/28/2014 Ok Per: Mike Stralla COUNTY COUNSEL: (must approve all contracts and MOUs) Approved: September Disapproved: Date: By: **SEE COMMENTS To \$2.01-\$1311 **Please forward to Risk Management upon approval.** RISK MANAGEMENT: (All contracts and MOUs except boilerplate grant funding agreements approved: Date: By: Disapproved: Date: By: Disapproved: Date: By: DISAPPROVAL: (Specify department(s) participating or directly affected by this contract) Approved: Disapproved: Date: By: DISAPPROVAL: (Specify department(s) participating or directly affected by this contract) DISAPPROVED: Date: By: DISAPPROV	Division:	L	ong Range Pla	nning		Ad	dress	s: 63	0 K Stre	et, Sui	ite 400)	
Authorized Signature: Sandy Event Contract Services Unit CONTRACTING DEPT: Transportation Service Requested: Review & Approve Contract Term: Contract/Amendment Amount: \$0.00 Compliance with Human Resources Requirements: Yes: X No: Compliance verified by: Contract Notification Sent: 04/24/2014 HR Response Received: 04/28/2014 Ok Per: Mike Stralla COUNTY COUNSEL: (must approve all contracts and MOUs) Approved: Disapproved: Date: By: ** SEG COMMERTS TO \$201-\$1311 Please forward to Risk Management upon approval. RISK MANAGEMENT: (All contracts and MOUs except boilerplate grant funding agreements Please forward to Risk Management upon approval. RISK MANAGEMENT: (All contracts and MOUs except boilerplate grant funding agreements Disapproved: Date: By: DTHER APPROVAL: (Specify department(s) participating or directly affected by this contract) Disapproved: Date: By: DTHER APPROVAL: (Specify department(s) participating or directly affected by this contract) Disapproved: Date: By:	Dept Contact:	N	lichele Weimer								95814	1	
CONTRACTING DEPT: Transportation Service Requested: Review & Approve Contract Term: Contract/Amendment Amount: \$0.00 Compliance with Human Resources Requirements: Yes: X No: Compliance verified by: Contract Notification Sent: 04/24/2014 HR Response Received: 04/28/2014 Ok Per: Mike Stralla COUNTY COUNSEL: (must approve all contracts and MOUs) Approved: \(\subseteq \text{Construction} \) Disapproved: \(\subseteq \text{Data:} \) Date: \(\subseteq \text{By:} \) Date: \(\subseteq \text{By:} \) By: \(\subseteq \text{Data:} \) Please forward to Risk Management upon approval. RISK MANAGEMENT: (All contracts and MOUs except boilerplate grant funding agreements) Approved: \(\subseteq \text{Disapproved:} \) Date: \(\subseteq \text{Data:} \) By: \(\subseteq \text{Data:} \) Date: \(\subseteq \text{By:} \) By: \(\subseteq \text{Data:} \) Date: \(\subseteq \text{By:} \)	Phone:	X	5670	0 /		Ph	one:	(91	6) 737-	-3700			
CONTRACTING DEPT: Transportation Service Requested: Review & Approve Contract Term: Contract/Amendment Amount: \$0.00 Compliance with Human Resources Requirements: Yes: X No: Compliance verified by: Contract Notification Sent: 04/24/2014 HR Response Received: 04/28/2014 Ok Per: Mike Stralla COUNTY COUNSEL: (must approve all contracts and MOUs) Approved: \(\subseteq \text{Construction} \) Disapproved: \(\subseteq \text{Data:} \) Date: \(\subseteq \text{By:} \) Date: \(\subseteq \text{By:} \) By: \(\subseteq \text{Data:} \) Please forward to Risk Management upon approval. RISK MANAGEMENT: (All contracts and MOUs except boilerplate grant funding agreements) Approved: \(\subseteq \text{Disapproved:} \) Date: \(\subseteq \text{Data:} \) By: \(\subseteq \text{Data:} \) Date: \(\subseteq \text{By:} \) By: \(\subseteq \text{Data:} \) Date: \(\subseteq \text{By:} \)	Authorized Signa	ıtur	e: <u>\$.R.</u>	witt									
Service Requested: Review & Approve Contract Term: Contract/Amendment Amount: \$0.00 Compliance with Human Resources Requirements: Yes: X No: Compliance verified by: Contract Notification Sent: 04/24/2014 HR Response Received: 04/28/2014 Ok Per: Mike Stralla COUNTY COUNSEL: (must approve all contracts and MOUs) Approved: Disapproved: Date: By: **Ses Comments To \$261-\$1311 Please forward to Risk Management upon approval. RISK MANAGEMENT: (All contracts and MOUs except boilerplate grant funding agreements			Sandy Ewert										
Contract Term: Contract/Amendment Amount: \$0.00 Compliance with Human Resources Requirements: Yes: X No: Compliance verified by: Contract Notification Sent: 04/24/2014 HR Response Received: 04/28/2014 Ok Per: Mike Stralla COUNTY COUNSEL: (must approve all contracts and MOUs) Approved: Contract Notification Sent: 04/24/2014 HR Response Received: 04/28/2014 Ok Per: Mike Stralla Date: SIZIH BY: LINDUMN Approved: Disapproved: Date: By: Please forward to Risk Management upon approval. RISK MANAGEMENT: (All contracts and MOUs except boilerplate grant funding agreements Approved: Disapproved: Date: By: DTHER APPROVAL: (Specify department(s) participating or directly affected by this contract) Approved: Disapproved: Date: By:	CONTRACTING	DE	EPT: Transpo	rtation									
Contract/Amendment Amount: \$0.00 Compliance with Human Resources Requirements: Yes: X No: Compliance verified by: Contract Notification Sent: 04/24/2014 HR Response Received: 04/28/2014 Ok Per: Mike Stralla COUNTY COUNSEL: (must approve all contracts and MOUs) Approved: Disapproved: Disapproved: Date: By: ** SEE COMMENTS To \$26T - \$1311 For schadule withthe Amendment Light Contracts and MOUs except boilerplate grant funding agreements Approved: Disapproved: Date: By: Date:		ed:	Review &	Approve									
Compliance with Human Resources Requirements: Yes: X No: Compliance verified by: Contract Notification Sent: 04/24/2014 HR Response Received: 04/28/2014 Ok Per: Mike Stralla COUNTY COUNSEL: (must approve all contracts and MOUs) Approved: Disapproved: Date: By: # Sec Comments To #261-S1311 For schadule withten Please forward to Risk Management upon approval. RISK MANAGEMENT: (All contracts and MOUs except boilerplate grant funding agreements Approved: Disapproved: Date: By: Date: By	Contract Term:												
Compliance verified by: Contract Notification Sent: 04/24/2014 HR Response Received: 04/28/2014 Ok Per: Mike Stralla COUNTY COUNSEL: (must approve all contracts and MOUs) Approved: Disapproved: Date: By: By: By: By: By: By: By: By: By: By			_		monto:	Voo: V	,	No					
Ok Per: Mike Stralla COUNTY COUNSEL: (must approve all contracts and MOUs) Approved:									nonce E	2000iya	d. O	41001004	
Approved:	Compliance veni	ica				04/24/2014	_ '''	1169	house i	CECEIVE	u. u	4/20/20 1	•
Approved: Co-torred Disapproved: Date: Date: By: Disapproved: Date: By: Date: By: Date: Date: By: Date: By: Date: Date: By: Date: Date: By: Date:	COUNTY COUN	9 E				d MOHe)			1				
Approved: Disapproved: Date: By: ** SEE COMMENTS To \$267-\$1311 Please forward to Risk Management upon approval. RISK MANAGEMENT: (All contracts and MOUs except boilerplate grant funding agreements Approved: Disapproved: Date: By: DTHER APPROVAL: (Specify department(s) participating or directly affected by this contract) Approved: Disapproved: Date: By:					oritiacis ar		1.01.1		Die			DAL	
Please forward to Risk Management upon approval. RISK MANAGEMENT: (All contracts and MOUs except boilerplate grant funding agreements Approved: Disapproved: Date: By: DTHER APPROVAL: (Specify department(s) participating or directly affected by this contract) Approved: Disapproved: Date: By:	the state of the s	1710						4	By. Z	2 LIVIA	7000		
Please forward to Risk Management upon approval. RISK MANAGEMENT: (All contracts and MOUs except boilerplate grant funding agreements Approved: Disapproved: Date: By: DISAPPROVAL: (Specify department(s) participating or directly affected by this contract) Approved: Disapproved: Date: By:	7.pp1010d.					<u> </u>					_		
Please forward to Risk Management upon approval. RISK MANAGEMENT: (All contracts and MOUs except boilerplate grant funding agreements Approved: Disapproved: Date: By: Disapproved: Disapproved: Date: By: Disapproved: Disapproved: Date: By:	* SEE	C	EMMENTS TO	, \$267-	- 51311		-						
Please forward to Risk Management upon approval. RISK MANAGEMENT: (All contracts and MOUs except boilerplate grant funding agreements Approved: Disapproved: Date: By: Disapproved: Disapproved: Date: By: Disapproved: Disapproved: Date: By:													_
Please forward to Risk Management upon approval. RISK MANAGEMENT: (All contracts and MOUs except boilerplate grant funding agreements Approved: Disapproved: Date: By: Disapproved: Disapproved: Date: By: Disapproved: Disapproved: Date: By:									_	1.1	-	11/	_
Please forward to Risk Management upon approval. RISK MANAGEMENT: (All contracts and MOUs except boilerplate grant funding agreements Approved: Disapproved: Date: By: Disapproved: Disapproved: Date: By: DTHER APPROVAL: (Specify department(s) participating or directly affected by this contract) Approved: Disapproved: Date: By:										1	e you	lated m	
Approved: Disapproved: Date: By:							,	•	m. h	orme	2	0	
Approved: Disapproved: Date: By:											- A	R	
Approved: Disapproved: Date: By: Date: By: Date: Date: Date: By: Date: Date: Date: By: Date:	Please forward	to i	Risk Managen	nent upon	approval.						R	DO (
Approved: Disapproved: Date: By: Date: By: Date: Date: By: Date: By: Date: Date: By: Date: Date: By: Date: Date: By: Date: Dat	RISK MANAGEN	ΛE	NT: (All contr	acts and N	MOUs exce	pt boilerplate	e grai	nt fun	ding ag	reeme	nts	noo	
Approved: Disapproved: Date: By: Date: By: Date: Date: By: Date: By: Date: Date: By: Date: Date: By: Date: Date: By: Date: Dat	Approved:	/	Disappi	roved.		Date: <	114	114	By: (2.	AM	AIN	
OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract) Approved: Date: By:							1	η, 1	100	/	75	00	
OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract) Approved: Date: By:											V	SNO	
Approved: Disapproved: Date: By:					name a			- 1/40.0		<u> </u>	-	P	
Approved: Disapproved: Date: By:		y a		W 10 10 10 10 10 10 10 10 10 10 10 10 10				1 4					- =
Approved: Disapproved: Date: By:											104	4-	
	OTHER APPROV	۷A	L: (Specify of	departmer	nt(s) particip	pating or dire	ectly a	affect	ed by th	nis con	tract)	7	T D
	Approved:		Disappr	oved:		Date:			Bv:			2	2
												TK TK	200
							w.E			1		£	_ C

12-1354 3A 1 of 1