Counsel please include this information in your billing description.Contract #: 16 - 41514Legistar #: 16-0464P & C #: NAActivity Code: 25000Activity Code: 25000Activity Code: 25000Project Disadvantaged Business Enterprise Annual Submittal for Federal Fiscal Year 2016-2017

RESOLUTION ROUTING SHEET

Division: Dept Contact: Phone: Dept Head Signal CONTRACTING I	Community Development Agency Administration and Finance Kady Leitner x5150 ture: S.R. Ewert Michele Weimer Administrative Services Officer DEPT: CDA	CONTRACTOR: N	A	
Service Requeste Contract Term:	d: Review && Approve NA			
Contract/Amendm				
Compliance with I	Human Resources Requirements: ed by: Contract Notification Sent:			
COUNTY COUNS	SEL: (must approve all contracts an	d MOUs)		
Approved:		Date: Shollo Date:	By: D. Limbon By:	MAPR 27 AM
				AM 8: 02
Please forward to	o Risk Management upon approval.			
RISK MANAGEM	ENT: (All contracts and MOUs exce	pt boilerplate grant fun	ding agreements	
Approved:	Disapproved:	Date: 5-12-16 Date:	By: //// By: CHR/RISK	
			'16 MAY 12 AM09:	16
OTHER APPROV	AL: (Specify department(s) participation	pating or directly affect	ed by this contract)	
Approved:	Disapproved:	Date:	Ву:	
Approved:	Disapproved:	Date:	By:	