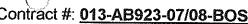
Contract #: 012-AB923-07/08-BOS CONTRACT ROUTING SHEET

Date Prepared:	05/24/2007		Need Date:	06/12/2007	
PROCESSING DE Department: Dept. Contact: Phone #: Department Head Signature:	Environmental M Marcella McTagg 5306	gart	Address: 9	TOR: Tahoe Sportfishi 200 Ski Run Blvo South Lake Taho 530) 541-7721	I, Suite 102 be, CA 96150
CONTRACTING I	DEPARTMENT:	EMD/AQMD			BOR AD
	d: Review of Co		AB 923 Fund	s	<u> </u>
Contract Term: 1				nent Value: \$35	<u> </u>
	luman Resources		Yes: [Non Rec
Approved: Approved:	EL: (Must approved: Disapproved: Disapproved:	e all contracts and Date. Date:	MOU's) 6/s//vu	_ By:	36)
DATE DE ONE ONE ONE ONE ONE ONE ONE ONE ONE ON					
	ENT: (All contracts		t boilerplate	grant funding agr	eements)/
Approved: X	Disapproved: [Disapproved: [Date: 6	/7/0/	By: V C	754778
2 M					
OTHER APPROVA	AL: (Specify depar	tment(s) participati	ing or directly	affected by this	contract).
Approved:	Disapproved: [Date:		Ву:	
Approved:	Disapproved:	Date:		By:	



Contract #: 013-AB923-07/08-BOS CONTRACT ROUTING SHEET

Date Prepared: 06/13/2007			Need Date: 07/02/2007		
PROCESSING D	EPARTMENT:		CONTRA	CTOR·	
Department: Environmental Mgmt				Action Water Sports of Tanoe	
Dept. Contact:	Linda Milligin/		Address:		
Phone #:	McTaggart 6668/5306			South Lake Tahoe, CA 96158	
Department			Phone:	(530) 544-0203	
Head Signature:	gerni Si	<i>let</i>	r Horio.	OUNSEL	
CONTRACTING	DEPARTMENT:	EMD/A	OMD	, E	
Service Requeste				nds	
Contract Term:	12/31/14		Contract/Amen	dment Value: \$17,792.00	
Compliance with I Compliance verifice		es requirements	? Yes:	□ No: ⊠	
COUNTY COUNS	EL: (Must appro	ove all contracts	and MOU's)		
Approved: 🗹	Disapproved:	Date:	4/22/07	By: (iv)	
Approved:	Disapproved:	Date:		By:	
					
. 					
GNMENT KCCC					
S Z Z					
			······	***************************************	

				C / 0	
RISK MANAGENI	ENT: (All contra	cts and MOU's	except boilerplate	e grant funding agreements),	
	Disapproved:		6/25/0/	By: Cosilla	
Approved: '	Disapproved:	☐ Date:		By:	
C.					
<u> </u>		***************************************			
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Liu N					
OTION SHOPPONG		_			
OTHER APPROVA Departments:	AL: (Specify dep	partment(s) parti	cipating or direct	tly affected by this contract).	
Approved:	Disapproved:	Date:	***************************************	By:	
Approved:	Disapproved:	Date:		By:	
	-				