Contract #: \_\_\_\_AGMT 08-1734

Escrow Agreement (#72403E)

## CONTRACT ROUTING SHEET

PROCESSING DE	, , , , , , , , , , , , , , , , , , ,		ACTOR:	
Department:	Transportation	Name:	<b>DeSilva Gates Construction</b>	
Dept. Contact:	Tim Prudhel			, E-
Phone:	x5974	Address:	P.O. Box 2909	S & &
Department Head		_	Dublin, CA 94568	A
Signature:	s. R. Eurot in sim	Phone:		$\circ$
	S. R. Ewest for sum. Tim C. Prudhel Prud	ahu		ALWROD
	Contract Services Officer			i i
CONTRACTING D	<b>EPARTMENT</b> : Transportat	tion		~ C
	Escrow Agmt for Deposits		etention	<u>3</u> §
Contract Term:	NA	С	ontract Amount: \$ NA	2 5
Compliance with H	uman Resources Requireme	nts? Yes:	X No:	<u> </u>
Compliance verified				8
•				9
COUNTY COUNSI	EL: (must approve all contra	acts and MOL	Js)	ģ
Approved:	Disapproved: Disapproved:	Date: 6/11/0	8 By: D. Linderson	`
Approved:	Disapproved:	Date:	By:	
			- AMERICA - AMER	
0 * PEN	LOVE LANGUAGE NOT INCLUDED	IN STATINTORLY	1-Packenger Form.	
R				
9			Ruusums made as	
			indicated.	·
			s. R. Ewert	
1 9 1			6/16/08	
N X			0110100	
N N N N N N N N N N N N N N N N N N N			<b>61</b> 16100	
	Risk Management upon a	pproval.	<b>0110</b> 100	
	Risk Management upon a	pproval.		
Please forward to	5400	Hear Code:	73/025	
Please forward to	5400	Hear Code:	73/025	
Please forward to	5400	Hear Code:	73/025	ents)
Please forward to	5400	Hear Code:	73/025	ents)
Please forward to	5400	Hear Code:	73/025	ents) ≥s:
Please forward to	5400	Hear Code:		ents)
Please forward to	5400	Hear Code:	T2403E  Jerplate grant funding agreem  OBy:  By:  S	000 0000 0000
Please forward to	5400	Hear Code:	73/025	ESOUR B
Please forward to high Chidek Chide:	ENT: (All contracts and MOL Disapproved: Disapproved:	User Code:	Ierplate grant funding agreem  OBy:  By:  S	ESOUR CES
Please forward to have code:	ENT: (All contracts and MOL Disapproved: Disapproved:	User Code:	Ierplate grant funding agreem  OBy:  By:  S	ESOUR CES
Please forward to Index Code: 30 RISK MANAGEME Approved: Approved: OTHER APPROV Department(s):	ENT: (All contracts and MOL Disapproved: Disapproved:	User Code:	Ierplate grant funding agreem  O By:  By:  Ser directly affected by this cont	ECEIVED ).
Please forward to Index Code: 30 RISK MANAGEME Approved: Approved: OTHER APPROV Department(s):	ENT: (All contracts and MOL Disapproved: Disapproved:	User Code:	r directly affected by this cont	ECEIVED ).
Please forward to have code:	ENT: (All contracts and MOL Disapproved: Disapproved:	User Code:	Ierplate grant funding agreem  OBy:  By:  S	ECEIVED ).

ASSIGNIMENT