CONTRACT ROUTING SHEET				
PROCESSING DEPARTMENT: Department: Community Development Agency Division: Administration and Finance Dept Contact: Tom Meyer Phone: x5911 Authorized Signature: A. R. W. Lww.t.			CONTRACTOR: Name: North State Resources, Inc. Address: 2020 L Street, Suite 340 Sacramento, CA 95811 Phone: (916) 446-2566	
CONTRACTING DEPT: Transervice Requested: Review Contract Term: No change Contract/Amendment Amount: Compliance with Human Reso Compliance verified by: Contract Contr	alyst nd Procurment Unit sportation Division v & Approve \$156,228.32		Date Neede Funding So (HBP) X No:	urces: Highway Bridge Program
Approved: Dis	t approve all contracts and approved:approved:		1 1	By: J. Sunfara By:
Please forward to Risk Mana	gement upon approval.			1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
RISK MANAGEMENT: (All o	ontracts and MOUs except	boilerp	late grant fund	ing agreements
	approved:approved:		<u>4-18-16</u>	By: 45 By:
				EDCHR/RISK 116 APR 14 PM03:53
OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract)				
	approved:			By:
Approved: Dis	approved:	Date:		By: