## CONTRACT ROUTING SHEET

## PROCESSING DEPARTMENT:

Department:
Dept. Contact:
Phone:
Department Head Signature:

| Transportation |
| :--- |
| Tim Prudhel |
| $\times 5974$ |



Tim C. Prudhel Contract Services Officer

CONTRACTOR:
Name: $\quad$ State of California (Caltrans)
Address: 703 B Street Marysville, CA 95901
Phone: 530-741-5122

CONTRACTING DEPARTMENT: Transportation
Service Requested: Disadvantaged Business Enterprise (DBE) Annual Submittal Contract Term: NA
Compliance with Human Resources Requirements? Yes: Contract Amount: \$-0. Compliance verified by: NA - DBE Implementation Agreement.

COUNTY COUNSEL: (must approve all contracts and MOUs) Approved: Approved: Disapproved: Disapproved: $\qquad$ Date:


By:

$\qquad$
Please Return Directly To DOT.

| Index Code: 306500 | User Code:_2 $\quad$ 25000 A |
| :--- | :--- |

RISK MANAGEMENT: (All contracts and NOUs except boilerplate grant funding agreements)
Approved: $\qquad$ Disapproved: $\qquad$ Date: $\qquad$ By: $\qquad$
Approved: $\square$ Disapproved: DD Date: $\qquad$ By: $\qquad$

## RISK MANAGEMENT APPROVAL NOT REQUIRED

OTHER APPROVAL (Specify departments) participating or directly affected by this contract).
Departments):
Approved: $\qquad$ Disapproved:
$\square$
Date: By: $\qquad$
Approved: Disapproved: Date: By: $\qquad$

