

CONTRACT ROUTING SHEET

Date Prepared: 09/04/2019

Need Date: 09/19/2019

PROCESSING DEPARTMENT:

Department: Transportation
Dept. Contact: Elizabeth Zangari
Phone #: X 7595
Department: Transportation
Head Signature: *Rafael Martinez*
Rafael Martinez, Director of
Transportation

RESOLUTION

CSA 9 -Lynx Trail ZOB - Set
Address: Measure for Election
Phone: _____

CONTRACTING DEPARTMENT: Department of Transportation

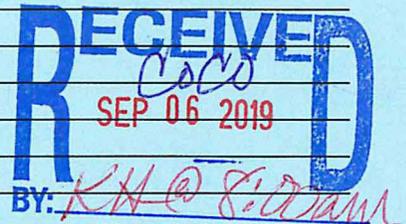
Service Requested: Review and Approval
Contract Term: N/A Contract Value: \$0.00
Compliance with Human Resources requirements? Yes: _____ No: _____
Compliance verified by: N/A - Resolution

COUNTY COUNSEL: (Must approve all contracts and MOU's)

Approved: X Disapproved: _____ Date: 9/10/19 By: Bre Moebius
Approved: _____ Disapproved: _____ Date: _____ By: _____

Please see and incorporate
edits on draft.

Edits made as indicated. 9/11/19 *clj*



RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)

Approved: ✓ Disapproved: _____ Date: 9/10/19 By: Maryellen Peters
Approved: _____ Disapproved: _____ Date: _____ By: _____

Please return directly to Department - No Risk Management Review required

No insurance indemnity needed, But Resolution for Voter
election to approve Tax increase

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).

Departments: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____