Agreement # N/A

Legistar # _____

AGREEMENT CONTRACT ROUTING SHEET

Date Prepared:	06/22/2020	Need Date:	06/22/2020
PROCESSING DEPARTMENT:		CONTRACTOR:	
Department: Dept. Contact: Phone: Department Head Signature:	Dept. of Transportation Andrew Gaber 5932 Add Carlot Ad	Name: Address: Phone: Org Code: Project #	N/A
		(if applicable	e):
Funding Source: CONTRACTING DEPARTMENT: Service Requested: Review and Approve Description: Updates to the EDC Drainage Manual (see memo for details) Contract Term: N/A			
COUNTY COUNSEL: (Must approve all contracts and MOU's) Approved: Disapproved: Date: Approved: Disapproved: Date: By: By: By: By: By: By: </td			
		1	EDC COUNTY COUNSEL
HR APPROVAL: WILL BE REVIEWED THROUGH WORKFLOW			
RISK MANAGEMENT: WILL BE REVIEWED THROUGH WORKFLOW			
PLEASE EMAIL SIGNED DOCUMENT TO: Thank you!			
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