

Record **Working Shop** Drawing Transmittal

Date _____

TO: _____

FROM: _____

(Final Review Office)

PROJECT NAME _____

FINANCIAL PROJECT ID _____

FEDERAL AID PROJECT NO. _____

CONTRACT ID NUMBER _____

COUNTY (SECTION) _____

STATE ROAD NUMBER _____

BRIDGE NUMBER _____

CONTRACTOR _____

ENGINEER OF RECORD _____

We are transmitting herewith the following Record **Working Shop** Drawings for archiving: 1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

For the Final Review Office: _____

(Signature)

(Date)

For the Receiving Office: _____

(Signature)

(Date)