

Internal Contract No: A1, 009-092-P-E2009

Purchasing Contract No: 307-S1011

Index Code: 405280

# CONTRACT ROUTING SHEET

Date Prepared: <sup>17</sup> November 12, 2010

Need Date: 12/1/10

EL DORADO COUNTY COUNSEL  
2010 NOV 11 10:05

### PROCESSING DEPARTMENT:

Department: Health Svcs - Public Health

Dept. Contact: Kathy Lang x 6362

2<sup>nd</sup> Contact: Tom Michaelson

Department: \_\_\_\_\_

Head Signature: 

NAR Neda West, Director

### CONTRACTOR:

Name: Barton Healthcare System

Address: 2170 South Avenue

South Lake Tahoe, CA 96150

Phone: \_\_\_\_\_

### CONTRACTING DEPARTMENT: Health Services Department

Service Requested: Participation & oversight of final stage ACCEL Initiative

Contract Term: 9/30-09 - 6/30/11 Contract Value: \$73,300.00

Compliance with Human Resources requirements? Yes  No

Compliance verified by: Feasibility Analysis Attached

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

Approved:  Disapproved: \_\_\_\_\_ Date: 11/19/10 By: 

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved:  Disapproved: \_\_\_\_\_ Date: 11/19/10 By: 

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

10/10/19 PM 3:11

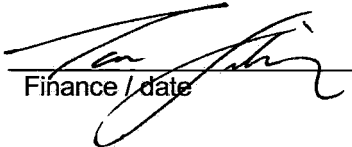
### OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract)

Departments: \_\_\_\_\_

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

 11/15/10  
Program Manager / date

 11/15/10  
Finance / date