

196-50811

Contract #: 126-S0911
Amendment II

CONTRACT ROUTING SHEET

Date Prepared: 9/18/08

Need Date: 9/25/08

PROCESSING DEPARTMENT:

Department: HR/Risk Management

Dept. Contact: Larry Costello

Phone #: 6625

Department

Head Signature: 

CONTRACTOR:

Name: Caremark

Address: _____

Phone: _____

EL DORADO COUNTY COUNSEL
2008 SEP 18 AM 11:15

CONTRACTING DEPARTMENT: HR/Risk Management

Service Requested: Review of Pharmacy Coverage Contract Amendment

Contract Term: n/a Contract Value: \$0

Compliance with Human Resources requirements? Yes: x No: _____

Compliance verified by: n/a

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

Approved: Disapproved: _____ Date: 9/23/08 By: Justitha Ken

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

9/23 Mtg w L. Green

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: Disapproved: _____ Date: 9/18/08 By: L Costello

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

HUMAN RESOURCES DEPT
RECEIVED
08 SEP 25 AM 8:24

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

Departments: _____

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

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