

Internal Contract No: 243-105A-M-R2010  
Purchasing Contract No: N/A  
Index Code: 419100

# CONTRACT ROUTING SHEET

Date Prepared: October 27, 2010

Need Date: RUSH

**PROCESSING DEPARTMENT:**

Department: Health Svcs - Mental Health  
Dept. Contact: Valerie Rooker x 6224  
2<sup>nd</sup> Contact: Tom Michaelson x6203

**CONTRACTOR:**

Name: CA Dept of Mental Health  
Address: 1600 9<sup>th</sup> Street  
Sacramento, CA 95814  
Phone: 916-653-7968

Department  
Head Signature:   
Neda West, Director

**CONTRACTING DEPARTMENT:** Health Services Department – Mental Health Division


Service Requested: Community Mental Health Services Block Grant renewal application (SAMSHA)

Contract Term: 7/01/10 through 06/30/11 Contract Value: \$135,802

Compliance with Human Resources requirements? Yes  No:

Compliance verified by: N/A - Incoming Funding

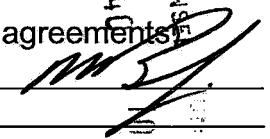
**COUNTY COUNSEL:** (Must approve all contracts and MOU's)

Approved:  Disapproved:  Date: 11/3/2010 By:   
Approved:  Disapproved:  Date:  By:

DORADO COUNTY COUNSEL  
2010 NOV - 1 PM 2:45  
HUMAN RESOURCES DEPT

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

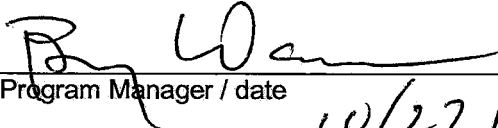
**RISK MANAGEMENT:** (All contracts and MOU's except boilerplate grant funding agreements)

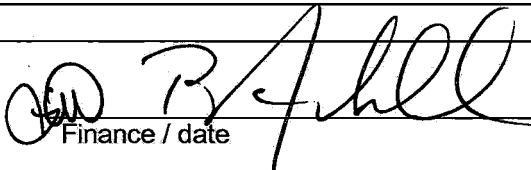
Approved:  Disapproved:  Date: 11/5/10 By:   
Approved:  Disapproved:  Date:  By:

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

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

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

  
Program Manager / date 10/27/10

 10/28/10  
Finance / date