Contract #: <u>576-L1311</u>

## **CONTRACT ROUTING SHEET**

<b>Date Prepared:</b>	April 23, 2013	Need Date: AS	AP
PROCESSING DEPARTMENT:		CONTRACTOR:	/I. Abel & Laura B. Abel
Department:	Procurement & Contracts	Name: ADM Ti	
	Sue Hennike	Address:	ust
Phone #:	x5577	Address.	
Department	24	Phone:	
Head Signature:	SAT	Thorie.	
CONTRACTING DEPARTMENT: CAO – Facilities			
Service Requested: Lease of Facility for Mental Health at 768 Pleasant Valley Road			
Contract Term:		Contract Value: \$2,60	02,524.00
Compliance with I	Human Resources requiremented by:	s? Yes: N/A	No:
Approved:	EL: (Must approve all contrac Disapproved: Disapproved:		By: J. Sunfedno By:
		William State Co. Company Co.	2
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	TO RISK MANAGEMENT. THANKS ENT: (All contracts and MOU's Disapproved:		unding agreements) By:
Approved:	Disapproved:	Date: 4/30/13	By: G Zeigh
approved per still need o	language for insurar		00
OTHER APPROV Departments:	AL: (Specify department(s) pa	rticipating or directly affect	ted by this contract).
Approved:	Disapproved:	Date:	By:
Approved:	Disapproved:	Date:	By: