

Contract #: 378-S1010. A3
Index Code: 418400

CONTRACT ROUTING SHEET

Date Prepared: 2/13/14

Need Date: _____

PROCESSING DEPARTMENT:

Department: HHS/Mental Health
Dept. Contact: Sharon Keoppel

CONTRACTOR:

Name: Placer County
Address: 3091 County Center Drive, Suite 290
Auburn, CA 95603
Phone: _____

Phone #: X 4811

Department _____

Head Signature: 
On Ashton, M.P.A., Director

CONTRACTING DEPARTMENT: Health and Human Services Agency/MHD

Service Requested: EDC to provide MH services for Placer Co Clients at the EDC PHF

Contract Term: Perpetual Contract/Grant Value: \$200,000 / yr

Compliance with Human Resources requirements? N/A Yes _____ No: _____

Compliance verified by: Not applicable - incoming funding

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

Approved: Disapproved: _____ Date: 3/24/14 By: 

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

EL DORADO COUNTY COUNSEL
14 MAR 24 AM 10:52

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

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

Approved: Disapproved: _____ Date: 3/25/14 By: 

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

RECEIVED
HUMAN RESOURCES DEPT.
14 MAR 25 AM 9:55

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

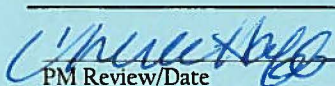
NOTE: All contracts that involve the acquisition of software or computer related items must be first approved by IT.

Any contract that requires approval from another department must also be first approved by the other department.

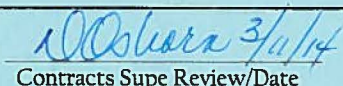
Departments: _____

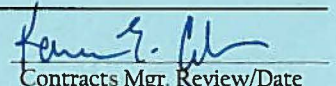
Approved: _____ Disapproved: _____ Date: _____ By: _____

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


PM Review/Date


CFO Review/Date 3/21/14


Contracts Supe Review/Date 3/11/14


Contracts Mgr. Review/Date