

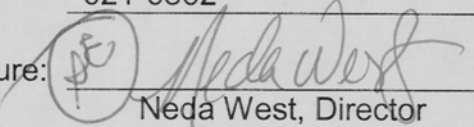
Internal Contract No: 721-PHD0408
Purchasing Contract No: 026-S0911
Index Code: 404143

CONTRACT ROUTING SHEET

Date Prepared: December 4, 2008

Need Date: December 18, 2008

PROCESSING DEPARTMENT:

Department: Health Svcs Dept - PH Div.
Dept. Contact: Kathy Lang
Phone #: 621-6362
Department
Head Signature: 
Neda West, Director

CONTRACTOR:

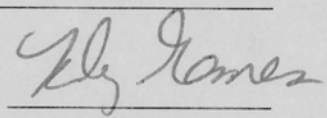
Name: Progress House, Inc.
Address: 2914 "B" Cold Springs Road
Placerville, CA 95667
Phone: _____

EL DONADO COUNTY COUNSEL
2008 DEC 11 AM 2:45

CONTRACTING DEPARTMENT: Health Services Department - Public Health Division

Service Requested: Substance abuse treatment services and drug testing
Contract Term: 7/1/08 - 6/30/09 Contract Value: \$95,736.00
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: 12/11/08 By: 
Approved: _____ Disapproved: _____ Date: _____ By: _____

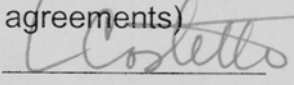
please see attached changes/corrections on pgs. 1, 2, 4, 5, and page note "amended" in titles for Exhibits B + C.

Dmo Klaus 12/23/08

Also, verify that original item C.6 for Exhibit B (now 3(F)) is only substantive change. If there are others, they should be identified in the amendment. Also double check new Article III to be sure all original language you intend to include is there. Risk note - 10 days notice re. cancellation under special provisions

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: Disapproved: _____ Date: 12/16/08 By: 
Approved: _____ Disapproved: _____ Date: _____ By: _____

RECEIVED
HUMAN RESOURCES DEPT
08 DEC 16 PM 4:33

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

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