

Internal Contract No: A-1, 101-129-P-E2010

Purchasing Contract No: 016-S1111

Index Code: 403210

CONTRACT ROUTING SHEET

Date Prepared: ~~July 28, 2010~~ 8/5/10

Need Date: 8/19/10

PROCESSING DEPARTMENT:

Department: Health Svcs Dept – PH Div.

Dept. Contact: Kathy Lang

Phone #: x6362

Department

Head Signature: 

Neda West, Director

CONTRACTOR:

Name: Sacramento County

Address: 4600 Broadway, Suite 2300

Sacramento, CA 95820

Phone: 916-874-9231

CONTRACTING DEPARTMENT: Health Services Department – Public Health Division

Service Requested: PH Lab Testing Svcs

Contract Term: 7/1/10 - 6/30/11

Contract Value: \$30,000.00

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: 8/20/10 By: 

Approved: Disapproved: Date: By:

ELI J. HUNTER, COUNTY COUNSEL
2010 AUG 23 5 PM 2:32

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: Disapproved: Date: 8/23/10 By: 

Approved: Disapproved: Date: By:

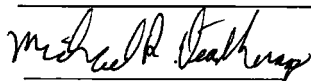
ELI J. HUNTER, COUNTY COUNSEL
2010 AUG 23 AM 8:07

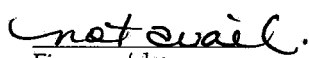
OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).

Departments: _____

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

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


Program Mgr / date 7-28-10
REV. 12/2000 (05-0311)


Finance / date