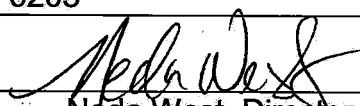


Internal Contract No: 283-162-M-E2010
Purchasing Contract No: 476-O1010
Index Code: 419100

CONTRACT ROUTING SHEET


Date Prepared: May 12, 2010
~~April 21, 2010~~

Need Date: 5/26/10
~~5/12/10~~

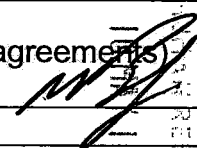
PROCESSING DEPARTMENT:
Department: Health Svcs Dept – MH Div.
Dept. Contact: Thomas Michaelson
Phone #: 6203
Department
Head Signature: 
Neda West, Director

CONTRACTOR:
Name: South Lake Tahoe Women's Center
Address: 2941 Lake Tahoe Blvd.
South Lake Tahoe, CA 96150
Phone: 530-544-2118

CONTRACTING DEPARTMENT: Health Services Department – Mental Health Division
Service Requested: Coordination of services for victims of domestic violence and sexual assault
Contract Term: Date of execution to 6/30/13 Contract Value: \$0
Compliance with Human Resources requirements? Yes No:
Compliance verified by: N/A

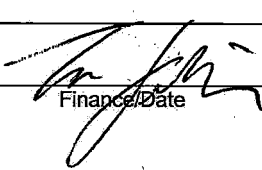
COUNTY COUNSEL: (Must approve all contracts and MOU's)
Approved: Disapproved: _____ Date: 5-18-10 By: 
Approved: _____ Disapproved: _____ Date: _____ By: _____

EL DORADO COUNTY COUNSEL
MAY 13 PM 4:10

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!
RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)
Approved: Disapproved: _____ Date: 5/19/10 By: 
Approved: _____ Disapproved: _____ Date: _____ By: _____

EL DORADO COUNTY COUNSEL
MAY 19 PM 2:35

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).
Departments: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____

CSIC-C 4/29/10  4/29/10
Program Mgr/Date Finance/Date