


582-0411

Contract #: 461 S1210 A1
Index Code: 404112


CONTRACT ROUTING SHEET

Date Prepared: 5/8/2014 Need Date: 5/22/14

PROCESSING DEPARTMENT:
Department: HHS-Mental Health
Dept. Contact: Sharon Keoppel
Phone #: 4811
Department Head Signature: 
Don Ashton, Director


CONTRACTOR:
Name: EL DORADO COUNTY OFFICE OF EDUCATION
Address: 6767 GREEN VALLEY ROAD
PLACERVILLE, CA 95667
Phone: 530 401 4647

CONTRACTING DEPARTMENT: Health and Human Services Agency
Service Requested: SAMHSA Model Program at schools within the County
Contract Term: execution - 6/30/16 Contract/Grant Value: \$392,500
Compliance with Human Resources requirements? N/A Yes No
Compliance verified by: Feasibility Analysis attached.

COUNTY COUNSEL: (Must approve all contracts and MOU's)
Approved: Disapproved: Date: 5/23/14 By: 
Approved: Disapproved: Date: By:

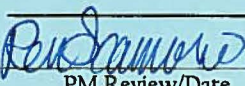
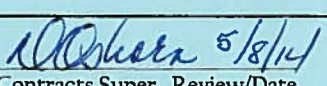
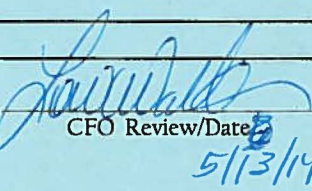
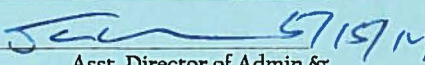
EL DORADO COUNTY COUNSEL
2014 MAY 16 AM 11:35

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)
Approved: Disapproved: Date: 5/21/14 By: 
Approved: Disapproved: Date: By:

RECEIVED
RISK MANAGEMENT
14 MAY 27 PM

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:

 5/12/14 PM Review/Date
 5/8/14 Contracts Super. Review/Date
 5/13/14 CFO Review/Date
 5/15/14 Asst. Director of Admin & Finance Review/Date