

Internal Contract No: A-2, 366-173-M-E2010
 Purchasing Contract No: 454-S1010
 Index Code: 419100

CONTRACT ROUTING SHEET

Date Prepared: ██████████ May 9, 2011

Need Date: May 19, 2011

PROCESSING DEPARTMENT:

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

CONTRACTOR:

Name: Willow Glen Care Center
 Address: 1547 Plumas Court
Yuba City, CA 95991
 Phone: 530-751-9903

CONTRACTING DEPARTMENT: Health Services Department – Mental Health Division

Service Requested: Adult residential treatment facility
 Contract Term: 4/15/10 to 4/14/13 Contract Value: \$275,000
 Compliance with Human Resources requirements? Yes No
 Compliance verified by: Chris Little

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

Approved: Disapproved: _____ Date: 5/10/11 By: *Juan Beal*
 Approved: _____ Disapproved: _____ Date: _____ By: _____

EL DORADO COUNTY COUNSEL
 2011 MAY 9 PM 1:43

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: Disapproved: _____ Date: 5/10/11 By: *MSJ*
 Approved: _____ Disapproved: _____ Date: _____ By: _____

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

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

By Wan
 Program Mgr/Date
 4/15/11
 Delete 3.09
 done TM

[Signature] 5/3/11
 Finance/Date