Contract #: 454-S1010, A4

Index Code: 419100 4/8400

CONTRACT ROUTING SHEET

Date Prepared:	2/12/13	Need Dat	e: 2/5	6/13		
PROCESSING D	EPARTMENT:	CONTRA	CONTRACTOR:			
Department:	HHSA/MHD	Name:	Willow Glen	Care Center		
Dept. Contact:	Kathy Lang	Address:	1547 Plumas	Court		
Phone #:	X7147		Yuba city, Ca 95991			
Department	× · 1 1 1	Phone:	530-751-990	3		
Head Signature:	(Sund / Calor				Market 1	
	Daniel Nielson, M.P.A., Director					
CONTRACTING	DEPARTMENT: Health and Hur	man Services	Agency/MHD			
	d: A4 to increase NTE for adult i			tv		
	4/15/10 - 4/14/13 4/30/12		/Grant Value:		159,000	
_	Human Resources requirements?	Yes		No:		
Compliance verific		bu m	Ke Stre	Ma,		
COLINTY COLING	E.A.	Ø			11976	
	SEL: (Must approve all contracts a		/ Di	1. 5	× //	
Approved:	Disapproved:	Date:		: Suolit	Ken	
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Approved:	ENT: (All contracts and MoU's experience) Disapproved:	Date:	By By		W	
Approved:	Disapproved:	Date: 36	B		122	
Approved.	Disappioved.	Date. Sign	5	my per	No.	
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Resummi	t 3/5/13. Intrive	, olease M	ave HHS 10	lewtihed a	S	
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	AL: (Specify department(s) partic					
	that involve the acquisition of software					
Departments:	quires approval from another departme	nt must also be i	rirst approved by	the other depa	rtment.	
Approved:	Disapproved:	Date:	В	<i>r</i> 1	121 T	
Approved:	Disapproved:	Date:	B	r		
Approved.	Disappioved	Date.	D		517	
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PM Review/Date	CEO Review/Date	Contracts Supe Re	eview/Date	ontracts Mgr Review	w/Date	
Pay 12/2000 (GS-GVP)			11-0	593 3A 1 of 1		

Rev. 12/2000 (GS-GVP)