

# CONTRACT ROUTING SHEET

Date Prepared: 06/12/2009

Need Date: 06/26/09

**PROCESSING DEPARTMENT:**

Department: Dept. of Child Support Svs.

Dept. Contact: Miguel Delgado

Phone #: X4831

Department Head Signature: *Rebecca Hiles*  
Rebecca Hiles, Deputy Director  
for Laura D. Roth

**CONTRACTOR:**

Name: SUPERIOR COURT OF CALIFORNIA

Address: 2850 Fairlane Court, Bldg C Placerville, CA 95667

Phone: 530-295-2536

**CONTRACTING DEPARTMENT:** Dept. of Child Support Services

Service Requested: Comprehensive Court Collection Program pursuant to Penal Code 1463.007

Contract Term: Perpetual Contract Value: \_\_\_\_\_ Actual Collection Costs \_\_\_\_\_

Compliance with Human Resources requirements? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Compliance verified by: \_\_\_\_\_

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

Approved: ✓ Disapproved: \_\_\_\_\_ Date: 6-12-09 By: *[Signature]*

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

**PLEASE FORWARD TO RISK MANAGEMENT. THANKS!**

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

Approved: ✓ Disapproved: \_\_\_\_\_ Date: 6/15/09 By: *[Signature]*

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

**PLEASE CALL MIGUEL X4831 TO PICK UP WHEN READY. THANKS!**

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

Departments: \_\_\_\_\_

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_