

# CONTRACT ROUTING SHEET

Date Prepared: November 15, 2007

Need Date: November 30, 2007

**PROCESSING DEPARTMENT:**

Department: Public Health

Dept. Contact: Dan Buffalo

Phone #: 621-6226

Department Head Signature: *Gayle Erbe-Hamlin*

Gayle Erbe-Hamlin

**CONTRACTOR:**

Name: California Department of Public Health

Address: MS 7002, P.O. Box 997377  
Sacramento, CA 95899-7377

Phone: (916) 650-6416

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 EL DORADO COUNTY COUNSEL  
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*Sharon Patterson*

**CONTRACTING DEPARTMENT:** Public Health

Service Requested: Bioterrorism Grant (Incoming Funding)

Contract Term: 1 year

Contract Value: \$67,091

Compliance with Human Resources requirements? Yes:            No:           

Compliance verified by: N/A

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

Approved:            Disapproved:            Date: 12/3/07 By: *Lesley Gomez*

Approved:            Disapproved:            Date:            By:           

ASSIGNMENT  
 DATE: 11/19/07  
 ATTORNEY: LESLIE GOMEZ  
 DEPT./INDEX NO.: 401131  
 BY: *GH*

*\* identify Contract Administrator (Chris Weston?)  
under project representatives, Ex. A § 4*

*\* clarity needed in Ex. C § 4 dispute resolution  
provision as noted on copy provided for  
review*

*Note: subcontracting requirements in Ex. D § 5 if applicable  
(~~boilerplate~~ requirement prior approval by CDPH, and CDPI  
right to require substitution or termination of subcontract)*

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved:            Disapproved:            Date: 12/5/07 By: *Costello*

Approved:            Disapproved:            Date:            By:           

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

Departments:           

Approved:            Disapproved:            Date:            By:           

Approved:            Disapproved:            Date:            By: