

DATE 08/04/06 Contract Name: First 5 of El Dorado, Special Needs Demonstration Project  
ATTORNEY Rebecca S Contract # 0607-45-108-703  
DEPT./INDEX NO. 402135 Budget Code 402135

# CONTRACT ROUTING SHEET

BY: MU

**PROCESSING DEPARTMENT:**

Department: Public Health  
Dept. Contact: Dan Buffalo  
Phone #: 621-6226  
Department Head                      Date: August 2, 2006  
Signature: [Signature]

**CONTRACTOR:**

Name: First 5 of El Dorado  
Address: 4111 Creekside Drive, Suite B  
Shingle Springs, CA 95682  
Phone: (530) 672-8298

**CONTRACTING DEPARTMENT:** Public Health

Compliance with Human Resources requirements? Yes: X No:         
Compliance verified by: N/A – Incoming Funding

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

Approved: X Disapproved:        Date: 6/14/06 By: [Signature]  
Approved:        Disapproved:        Date:        By:       

EL DORADO COUNTY COUNSEL  
2006 AUG -3 PM 4:11

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

Approved:        Disapproved:        Date:        By:         
Approved:        Disapproved:        Date:        By:       

**INCOMING FUNDING  
RISK APPROVAL NOT REQUIRED**

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

**DEPARTMENT:**

Approved:        Disapproved:        Date:        By:         
Approved:        Disapproved:        Date:        By: