

Internal Contract No: 756-PHD0508 A-1

Purchasing Contract No: 987-F0810

Index Code: 401113

CONTRACT ROUTING SHEET

Date Prepared: March 13, 2009

Need Date: 4/14/09

PROCESSING DEPARTMENT:

Department: Health Svcs Dept - PH Div.

Dept. Contact: Kathy Lang

Phone #: x 6362

Department Head Signature: *(Signature)*

Neda West, Director

CONTRACTOR:

Name: Marshall Medical Center

Address: 1100 Marshall Way

Placerville, CA 95667

Phone: _____

CONTRACTING DEPARTMENT: Health Services Department - Public Health Division

Service Requested: Collaboration on medical svc to victims of Public Health disasters

Contract Term: 8/15/08 - 9/30/10 6/1/09 Contract Value: \$71,337.00

Compliance with Human Resources requirements? Yes No

Compliance verified by: Feasibility Analysis Attached

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

Approved: Disapproved: _____ Date: 4/10/09 By: *(Signature)*

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

** See memo and comments regarding*

DM (P) # 755-PHD0508A-1 approved this same day.

** Note: no General Liability insurance shown*

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements) *on certificate & there are auto insurance deductibles*

Approved: Disapproved: _____ Date: 4/15/09 By: *(Signature)*

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

Only auto insurance coverage attached. Please attach proof of General Liability coverage or self insurance before proceeding with contract services!

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

Departments: _____

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

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

EL DORADO COUNTY
COMMUNITY DEVELOPMENT
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HUMAN RESOURCES DEPT
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