

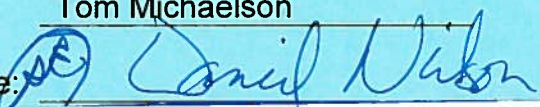
Internal Contract No: A2, 123-110-P-E2010
 Purchasing Contract No: 004-S1110
 Index Code: 404131,404132,404136

CONTRACT ROUTING SHEET

Date Prepared: 9/20/11

Need Date: 10/4/11

PROCESSING DEPARTMENT:

Department: Health Svcs - Public Health
 Dept. Contact: Kathy Lang x 6362
 2nd Contact: Tom Michaelson
 Department Head Signature: 

Daniel Nielson, MPA Acting Director

CONTRACTOR:

Name: Tahoe Youth & Family Svcs
 Address: 1021 Fremont
South Lake Tahoe, CA 96150
 Phone: _____

CONTRACTING DEPARTMENT: Health Services Department

Service Requested: Extension of AOD Counseling Agmt to match grant term & funding

Contract Term: 7/1/10 thru 6/30/12 Contract Value: \$71,548 FY 2011-12

Compliance with Human Resources requirements? Yes No
 Compliance verified by: Feasibility Analysis Attached

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

Approved: Cond'l Disapproved: _____ Date: 9/26/11 By: _____
 Approved: _____ Disapproved: _____ Date: _____ By: _____

Conditional approval: Put back in survival provision from original agreement Done 9/29/11 KLang

EL DORADO COUNTY COUNSEL
2011 SEP 20 PM 1:23

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!


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

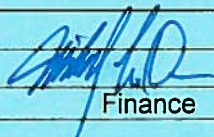
Approved: Disapproved: _____ Date: 9/28/11 By: KL
 Approved: _____ Disapproved: _____ Date: _____ By: _____

RECEIVED HUMAN RESOURCES DEPT.
11 SEP 27 PM 4:24

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

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

 9/1/11
 Program Manager Date

 9/2/11
 Finance Date