

Contract #: n/a  
Index Code: 403310

# CONTRACT ROUTING SHEET

Date Prepared: 2/8/13

Need Date: 2/22/13

**PROCESSING DEPARTMENT:**

Department: HHSA/Public Health  
Dept. Contact: Kathy Lang  
Phone #: X7147  
Department Head Signature: *Daniel Nielson*  
Daniel Nielson, M.P.A., Director

**CONTRACTOR:**

Name: EMS Plan Update  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

**CONTRACTING DEPARTMENT:** Health and Human Services Agency/PHD

Service Requested: 2013 Update to Emergency Medical Services Plan  
Contract Term: \_\_\_\_\_ Contract/Grant Value: \_\_\_\_\_  
Compliance with Human Resources requirements? N/A x Yes \_\_\_\_\_ No: \_\_\_\_\_  
Compliance verified by: \_\_\_\_\_

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

Approved: ✓ Disapproved: \_\_\_\_\_ Date: 2/13/13 By: *Josh Beck*  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

RECEIVED  
FEB 08 2013  
El Dorado County Courthouse

**PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!**

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

Approved: ✓ Disapproved: \_\_\_\_\_ Date: 2/19/2013 By: *Sudam*  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

13 FEB 14 11:41 AM  
HHS Agency/PHD

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

**NOTE:** All contracts that involve the acquisition of software or computer related items must be first approved by IT. Any contract that requires approval from another department must also be first approved by the other department.

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

*John T. Cold* 1/31/13 *[Signature]* 2/1/13 *[Signature]* 1/13/13 *Cynthia Kjellin*  
PM Review/Date CFO Review/Date Contracts Supe Review/Date Contracts Mgr. Review/Date