

Contract #: n/a
Index Code: _____

CONTRACT ROUTING SHEET

Date Prepared: 3/14/18 Need Date: 3/28/18

PROCESSING DEPARTMENT:
Department: Health & Human Svcs Agency
Dept. Contact: Lisa Konyecsni
Phone #: X 6901
Department
Head Signature: Patricia Charles-Heathers
Patricia Charles-Heathers, Ph.D., M.P.A., Director

CONTRACTOR:
Name: n/a
Address: _____
Phone: _____

CONTRACTING DEPARTMENT: Health and Human Services Agency
Service Requested: BH Commission By-laws
Contract Term: _____ Contract/Grant Value: 0
Compliance with Human Resources requirements? N/A X Yes _____ No: _____
Compliance verified by: _____

COUNTY COUNSEL: (Must approve all contracts and MOU's)
Approved: X Disapproved: _____ Date: 3/14/18 By: ABady
Approved: _____ Disapproved: _____ Date: _____ By: _____

RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)
Approved: _____ Disapproved: _____ Date: _____ By: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____
Does not need review from Risk. He

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).
NOTE: Any contract that involves the development, installation, implementation, storing, retrieving, transfer, or sending of electronic information, the acquisition of software or computer related items, or any other service/item that may be IT related, especially those that involve computers and telecommunications, must be approved by IT before submission to Counsel. This also applies to any other contract that requires approval from another department.

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

Please contact Kathryn Lang x7147 with questions or for contract packet pick-up. Thank you!

Yvonne Kellings 3/9/18
Chief Fiscal Officer Date

[Signature] 3/16/18
Deputy Director, Administration and Contracts Date

A/P or AVR Mgr Approval: ncx 3/9/18
Initials/Date

Contracts ASO Approval: [Signature] 3/16/18
Initials/Date