

CONTRACT ROUTING SHEET

Date Prepared: 6/9/09

Need Date: 6/24/09

PROCESSING DEPARTMENT:

Department: Human Services

Dept. Contact: Amy Higdon

Phone #: x4836

Department Head Signature: *Janet Walker-Conroy*

Janet Walker-Conroy,
Acting Director

CONTRACTOR:

Name: CA Dept. of Community Services and Development

Address: P.O. Box 1947

Sacramento, CA 95823-1947

Phone: 916-341-4200

CONTRACTING DEPARTMENT: Human Services

Compliance with Human Resources requirements? Yes: X No: _____

Compliance verified by: Patti Barton with original agreement on 12/17/07

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

Approved: ✓ Disapproved: _____ Date: 6-11-09 By: *Ed Han*

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

EL DORADO COUNTY COUNSEL
2009 JUN 11 PM 1:23

RISK MANAGEMENT: (Must approve all contracts, MOU's and boilerplate grant agreements)

Approved: ✓ Disapproved: _____ Date: 6/10/09 By: *MS*

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

PLEASE CALL AMY HIGDON AT x4836 FOR PICK UP. THANKS!

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

Departments: _____

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

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