

Contract #: 034-S1411 A2
Index Code: 403410 & 403430

CONTRACT ROUTING SHEET

Date Prepared: 6/17/14

Need Date: 7/1/14

PROCESSING DEPARTMENT:

Department: HHSA
Dept. Contact: Sharon Keoppel
Phone #: 4811
Department
Head Signature: Don Ashton, Director

CONTRACTOR:

Name: CA Forensic Medical Group (CFMG)
Address: 300 Foam Street, Suite B
Monterey, CA 93940
Phone: 831 649 8994

CONTRACTING DEPARTMENT: Health and Human Services Agency

Service Requested: Medical Svcs for County Detention Facilities
Contract Term: 7/1/13- 6/30/18 Contract/Grant Value: \$3,086,492.62
Compliance with Human Resources requirements? N/A Yes No
Compliance verified by: Feasibility Analysis attached.

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

Approved: X Disapproved: Date: 7/8/14 By: [Signature]
Approved: See comments Disapproved: Date: By:

7/14 No changes made per CFO regarding comments - [Signature]

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

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

Approved: [Signature] Disapproved: Date: 7/14/14 By: [Signature]
Approved: Please e-mail for final approval Disapproved: Date: By:

- copy of AI endorsement
- evidence of Primary

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: suggestions implemented
Approved: [Signature] Disapproved: Date: By: Sue Henrike
Approved: via email attached Disapproved: Date: By:

attached
Program Manager Review
Date: [Signature]

[Signature]
Contracts Supervisor Review
Date: 6/17/14

CFO Review
Date:

[Signature]
Asst. Director of Admin & Finance
Date: 7/1/14