

Internal Contract No: 135-114-P-E2011  
Purchasing Contract No: 204-S1211  
Index Code: 405100

# CONTRACT ROUTING SHEET

Date Prepared: 10/6/11

Need Date: 10/20/11

### PROCESSING DEPARTMENT:

Department: Health Svcs - Public Health  
Dept. Contact: Kathy Lang x 6362  
2<sup>nd</sup> Contact: Tom Michaelson  
Department  
Head Signature: *Neda West*  
Neda West, Director

### CONTRACTOR:

Name: Womenspace Unlimited  
Address: 2941 Lake Tahoe Blvd., Suite A  
South Lake Tahoe, CA 96150  
Phone: 530 544-2118

### CONTRACTING DEPARTMENT: Health Services Department

Service Requested: Domestic Violence Services  
Contract Term: 7/1/11 - 6/30/14 Contract Value: \$65,000.00 per yr  
Compliance with Human Resources requirements? Yes  No   
Compliance verified by: Feasibility Analysis Attached

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

Approved:  Disapproved: \_\_\_\_\_ Date: 10/11/11 By: *Judith Bede*  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

same comment as Center for Violence  
Free contract  
Revisions done

EL DORADO COUNTY COUNSEL  
2011 OCT 11 - 6 PM 1:25

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved:  Disapproved: \_\_\_\_\_ Date: 10/14/11 By: *KKen*  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

We need proof of workers' compensation coverage for contract.  
KKen

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

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

*SN* 9/19/11  
Program Manager Date

*[Signature]* 10/11/11  
Finance Date

RECEIVED  
HUMAN RESOURCES DEPT.