

Contract Number: 07-65047, Amendment I
Index Code: 402223

CONTRACT ROUTING SHEET

Date Prepared: March 25, 2008

Need Date: April 10, 2008

PROCESSING DEPARTMENT:

Department: Public Health
Dept. Contact: Dan Buffalo
Phone #: 621-6226
Department Head Signature: *Gayle Erbe-Hamlin*
Gayle Erbe-Hamlin

CONTRACTOR:

Name: California Department of Public Health
Address: 1501 Capitol Ave, Suite 715178
Sacramento, CA 95899
Phone: (916) 445-5900

EDUCATED COUNTY COUNSEL
2008 APR 10 11:21 AM
Hand Delivered

CONTRACTING DEPARTMENT: Public Health

Service Requested: Increase in compensation of HIV Prevention MOU, PREV 07-9/1
Contract Term: Three years Contract Value: \$224,968
Compliance with Human Resources requirements? Yes: No: X
Compliance verified by: N/A

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

Approved: X Disapproved: Date: 4-9-08 By: *[Signature]*
Approved: Disapproved: Date: By:

ASSIGNMENT
DATE: 03/31/2008
ATTORNEY: Rebecca S
DEPT./INDEX NO.: 40222
PH

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: ✓ Disapproved: Date: 4/11/08 By: *[Signature]*
Approved: Disapproved: Date: By:

Certificate of Self Insurance attached.

RECEIVED
HUMAN RESOURCES DEPT
APR 10 AM 8:12

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

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