

Internal Contract No: 048-167M-R 2011  
~~048-162-R-M2011~~  
 Purchasing Contract No: \_\_\_\_\_  
 Index Code: 419100

# CONTRACT ROUTING SHEET

Date Prepared: November 29, 2010

Need Date: RUSH

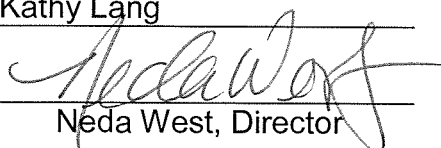
**PROCESSING DEPARTMENT:**

Department: Health Svcs - Mental Health

Dept. Contact: Tom Michaelson x6203

2<sup>nd</sup> Contact: Kathy Lang

Department: \_\_\_\_\_

Head Signature:   
 Neda West, Director

**CONTRACTOR:**

Name: El Dorado County Office of Education

Address: 6767 Green Valley Road  
Placerville, CA 95667

Phone: 530-295-2236

**CONTRACTING DEPARTMENT:** Health Services Department

Service Requested: MOU for services for students with IEP's

Contract Term: 1-1-11 to 6-30-11 Contract Value: \$450,000 ~~\$525,000~~

Compliance with Human Resources requirements? Yes  No: N/A

Compliance verified by: \_\_\_\_\_

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

Approved:  Disapproved: \_\_\_\_\_ Date: 12-22-10 By: 

Approved:  Disapproved: \_\_\_\_\_ Date: 1-31-11 By: 

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved:  Disapproved: \_\_\_\_\_ Date: 12/22/10 By: 

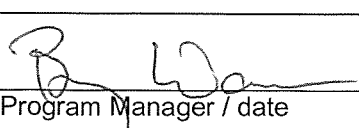
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

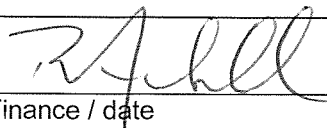
**OTHER APPROVAL:** (Specify department(s) participating or directly affected by this contract).

Departments: \_\_\_\_\_

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

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

 12/28/10  
 Program Manager / date

 12/8/10  
 Finance / date