

# CONTRACT ROUTING SHEET

Date Prepared: 03-31-11

Need Date: ASAP

**PROCESSING DEPARTMENT:**

Department: Human Services

Dept. Contact: DeAnn Osborn

Phone #: X7338

Department

Head Signature: *Daniel Nielson*

Daniel Nielson

**CONTRACTOR:**

Name: Lilliput Children's Services

Address: 1651 Response Road, Ste 300

Sacramento, CA 95815

Phone: (916) 923-5444

03/31/11  
11:40 AM  
COURT REPORTER

**CONTRACTING DEPARTMENT:** Human Services

Service Requested: Kinship Support Service Program

Contract Term: 07-01-10 through 6/30/12 Contract Value: \$285,120

Compliance with Human Resources requirements? Yes: X No:         

Compliance verified by: Mike Strella

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

Approved: ✓ Disapproved:          Date: 4-8-11 By: *WJ/Heery*

Approved:          Disapproved:          Date:          By:         

*\* Please make sure corporate secretary signs contract  
✓ Done. Osborn*

03/31/11  
11:40 AM  
COURT REPORTER

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

Approved: ✓ Disapproved:          Date: 4/8/11 By: *MSJ*

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:         

**NOTE: please call DeAnn Osborn for pick-up at X7338. Thank you!**