Contract #: 100-M1810

Index Code: 417200

## **CONTRACT ROUTING SHEET**

Date Prepared:	6/9/2017 6/22/17	Need Da	te: 6/21/2017	7/6/17	
PROCESSING D	EPARTMENT:	CONTRA	CONTRACTOR:		
Department:	HHSA	Name:		vices Authority (CalMHSA)	
Dept. Contact:	Consie Mote	Address:	3043 Gold Canal Driv	re, Suite 200	
Phone #:	X 7118		Rancho Cordova, CA	95670	
Department		Phone:	916-859-4818	VN 022605	
Head Signature:	Tatriai Charles-He		_		
	Patricia Charles-Heathers,	Ph.D., Director			
CONTRACTING	DEPARTMENT: HHSA				
Service Requeste	d: Participation in JPA State Hospita	l Bed Program		,	
Contract Term:	pon execution- 06/30/2019	Contrac	t/Grant Value: 🤏	12,618 / Varies	
Compliance with	Human Resources requirem			No:	
Compliance verifi	ed by:	1		7 1	
Approved:	SEL: (Must approve all cont Disapproved: Disapproved:	Date: 6/29	By:	Postaly	
RISK MANAGEM Approved: Approved:	PLEASE FORWARD TO IENT: (All contracts and MC Disapproved: Disapproved:	U's except boilerpla	ate grant funding By:	agreements)	
			210 .	<u> </u>	
NOTE: Any contract electronic information related, especially the Counsel. This also a Departments:	TAL: (Specify department(s) that involves the development, institute in the acquisition of software or cose that involve computers and topplies to any other contract that respectively.	stallation, implementation computer related items, elecommunications, musquires approval from an	n, storing, retrieving or any other servicest be approved by l' nother department.	, transfer, or sending of ce/item that may be IT T before submission to	
Approved:	Disapproved: Disapproved:	Date:	Бу:		
Approved:	Disapproved:	Date:	By:		
Please contact Cor	Date	. 50	for contract packet	pick-up. Thank you!	

Profession November 12