CONTRACT ROUTING SHEET

Date Prepared:	3/21/2013	Need Date:	ASAP – Board date 4/30/13
PROCESSING DI	EPARTMENT:	CONTRACTO	PR:
Department:	Child Support Services	Name: Sta	ate Department of Child pport Services (DCSS)
Dept. Contact:	Ginger Harms		Box 419064
Phone #:	7238	Ra 90	ncho Cordova, CA 95741-
Department Head Signature:	Louis Rox	Phone: 91	6-464-5177
	Laura D. Roth		1 JSVI
CONTRACTING	DEPARTMENT: Child Supp	ort Services	0
Service Requeste	d: Review Agreement to loa	n a Child Support Spe	
	5/1/2013 – 4/30/2015	Contract Value:	\$0.00
Compliance with I Compliance verification	Human Resources requiremented by:	ts? Yes:	No:
COUNTY COUNS	SEL: (Must approve all contra	cts and MOU's)	
Approved:	Disapproved:		By: 505 By:
Approved:	Disapproved:	Date:	By:
Our Department h	nas previously participated in the prior, agreement	nis inter-jurisdictional e ent which was approve	employee exchange program. d by the Board is enclosed.
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医特性处理的			0131
			TA A
DI FASE CALL (GINGER HARMS ext 7238 wh	en annroval	27
_I LLAGE CALL C	SINGER HARMIS EXT 1230 WIT	en approvai	P
RISK MANAGEM	TO RISK MANAGEMENT. THANK IENT: (All contracts and MOU	's except boilerplate g	rant funding agreements)
Approved:	Disapproved:	Date: 9/4/20	By: Addime
Approved:	Disapproved:	Date:`	By: <u></u> ω
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	'AL: (Specify department(s) p	articipating or directly	affected by this contract).
Departments:			
Departments: Approved:	Disapproved:	Date:	By:

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