

CONTRACT ROUTING SHEET

Date Prepared: 12/28/10

Need Date: 1/5/11 PLEASE RUSH

PROCESSING DEPARTMENT:

Department: Human Services

Dept. Contact: Amy Higdon

Phone #: x4836

Department

Head Signature: 

Daniel Nielson, Director

CONTRACTOR:

Name: CA Dept. of Community Services & Development

Address: P.O. Box 1947

Sacramento, CA 95812-1947

Phone: 916-341-4262

1 JAN 1 11 AM 2:26
HUMAN SERVICES DEPT

CONTRACTING DEPARTMENT: Human Services

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: 1-5-11 By: 

Approved: _____ Disapproved: _____ Date: _____ By: _____

EL DORADO COUNTY COUNSEL
2011 DEC 29 AM 10:48

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

Approved: ✓ Disapproved: _____ Date: 1/6/11 By: 

Approved: _____ Disapproved: _____ Date: _____ By: _____

PLEASE CONTACT AMY WHEN READY FOR PICKUP.
THANKS!

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

Departments: _____

Approved: _____ Disapproved: _____ Date: _____ By: _____

Approved: _____ Disapproved: _____ Date: _____ By: _____