

CONTRACT ROUTING SHEET

PROCESSING DEPARTMENT:

Department: Public Health
Dept. Contact: Dan Buffalo
Phone #: 621-6226
Department Head Date: February 22, 2007
Signature: *Dan Buffalo*

CONTRACTOR:

Name: California Department of Health Svcs
Address: 1501 Capitol Avenue, Ste 71-4001
MS 4607 Sacramento, CA 95899-7417
Phone: (916) 552-9200

CONTRACTING DEPARTMENT: Public Health

Compliance with Human Resources requirements? Yes No X

Compliance verified by: N/A, Incoming Funding

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

Approved: X Disapproved: Date: 3/5/07 By: *RC Soudan*
Approved: Disapproved: Date: By:

SACRAMENTO COUNTY COUNSEL
7:00 FEB 23 PM 2:17
HUMAN RESOURCES
DEPARTMENT

ASSIGNMENT
DATE: 02/26/2007
ATTORNEY:
DEPT/INDEX NO.:
BY: *[Signature]*

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

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

**INCOMING FUNDING
RISK APPROVAL NOT REQUIRED**

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

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