

Internal Contract No: 118-MHD0209
Purchasing Contract No: 656-M0911
Index Code: Funding

CONTRACT ROUTING SHEET

Date Prepared: March 19, 2009

Need Date: ~~4/2/09~~ 5/4/09

PROCESSING DEPARTMENT:
Department: Health Svcs Dept – MH Div.
Dept. Contact: Thomas Michaelson
Phone #: 6203
Department Head Signature: *Neda West*
Neda West, Director

CONTRACTOR:
Name: El Dorado County Office of Education
Address: 6767 Green Valley Road
Placerville, CA 95667
Phone: 530-295-2236

CONTRACTING DEPARTMENT: Health Services Department – Mental Health Division
Service Requested: Mental health services for students with disabilities
Contract Term: 7/1/09 to 6/30/10 Contract Value: \$80,000.00
Compliance with Human Resources requirements? Yes No:
Compliance verified by: N/A – funding agreement

COUNTY COUNSEL: (Must approve all contracts and MOU's)
Approved: Disapproved: Date: 5/1/09 By: *Edy B. Stone*
Approved: Disapproved: Date: _____ By: _____

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HUMAN RESOURCES DEPT
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PLEASE FORWARD TO RISK MANAGEMENT. THANKS!
RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)
Approved: Disapproved: Date: 5/5/09 By: *[Signature]*
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: _____

By [Signature] 3/19/09 *[Signature]* 3/20/09 *[Signature]* 3/24/09
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