

Contract #: 450-S1311
Index Code: 418400

CONTRACT ROUTING SHEET

Date Prepared: 4/16/13

Need Date: 5/7/13

PROCESSING DEPARTMENT:

Department: HHS/Mental Health
Dept. Contact: Kathy Lang
Phone #: X7147
Department
Head Signature: [Signature]
Daniel Nielson, M.P.A., Director

CONTRACTOR:

Name: North Valley Behavioral Health
Address: 1535 Plumas Court
Yuba City, CA 95991
Phone:

CONTRACTING DEPARTMENT: Health and Human Services Agency/MHD

Service Requested: Inpatient MH services for adults.
Contract Term: 7/1/13 - 12/31/18 Contract/Grant Value: \$200,000/yr
Compliance with Human Resources requirements? N/A Yes x No:
Compliance verified by:

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

Approved: X Disapproved: Date: 4/29/13 By: [Signature]
Approved: Disapproved: Date: By:

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

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

Approved: X Disapproved: Date: 5/2/13 By: [Signature]
Approved: Disapproved: Date: By:
Prof Lab Verboye within the GL Policy

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

NOTE: All contracts that involve the acquisition of software or computer related items must be first approved by IT. Any contract that requires approval from another department must also be first approved by the other department.
Departments:

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

[Signature]
PM Review/Date
11/12/2009 (30-301) 4/22/13

[Signature]
CFO Review/Date
4/22/13

[Signature] 4/17/13
Contracts Supe Review/Date

Contracts Mgr. Review/Date