

Internal Contract No: 053-169-M-E2011
Purchasing Contract No: 030-S1211
Index Code: 419200

CONTRACT ROUTING SHEET

Date Prepared: June 1, 2011

Need Date: June 15, 2011

PROCESSING DEPARTMENT:

Department: Health Svcs Dept – MH Div.

Dept. Contact: Thomas Michaelson

Phone #: 6203

Department Head Signature: *Neda West*

Neda West, Director

CONTRACTOR:

Name: Family Connections El Dorado, Inc.

Address: 2860 Smith Flat Road
Placerville, CA 95667

Phone: 530-626-5164

CONTRACTING DEPARTMENT: Health Services Department – Mental Health Division

Service Requested: MHSA Latino program on West Slope

Contract Term: 7/1/11 to 6/30/12

Contract Value: \$96,660

Compliance with Human Resources requirements? Yes No

Compliance verified by: Chris Little

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

Approved: Cond H Disapproved: _____ Date: 6/8/11 By: *Lush Bed*
Approved: _____ Disapproved: _____ Date: _____ By: _____

Please consult indemnity as attached
revision made in 6-10-11

DORADO COUNTY COUNSEL
2011 MAY 31 PM 2:02
DORADO COUNTY COUNSEL
2011 JUN - 1 PM 2:03

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: ✓ Disapproved: _____ Date: 6/9/11 By: *MJ*
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: _____

[Signature] 5/11
Program Mgr/Date

[Signature] 5/19/11
Finance/Date