

CONTRACT ROUTING SHEET

Date Prepared: 8-24-12

Need Date: 9-10-12

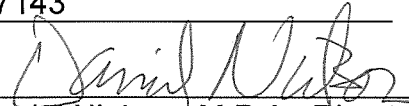
PROCESSING DEPARTMENT:

Department: HHSA / SSD
Dept. Contact: Shirley I. C. Hodgson

CONTRACTOR:

Name: Tahoe Turning Point, Inc.
Address: 2494 Lake Tahoe Blvd. (Mail: P.O. Box 17509, South Lake Tahoe, CA 96151)
South Lake Tahoe, CA 96150
Phone: 530 541-4594

Phone #: X7143

Department
Head Signature: 
Daniel Nielson, M.P.A., Director

CONTRACTING DEPARTMENT: Health and Human Services Agency – Social Services Division

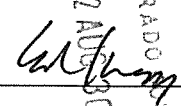
Service Requested: Therapeutic counseling, substance abuse services and testing and classes on an "as requested" basis for clients of HHSA

Contract Term: 5-28-10 to 5-27-13 Contract Value: 325,000

Compliance with Human Resources requirements? Yes 8-15-12 No: _____

Compliance verified by: Mike Strella


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

Approved: ✓ Disapproved: _____ Date: 9-10-12 By: 
Approved: _____ Disapproved: _____ Date: _____ By: _____

EL DORADO COUNTY COUNSEL
2012 AUG 30 AM 10:35

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: ✓ Disapproved: _____ Date: 9-11-12 By: 
Approved: _____ Disapproved: _____ Date: _____ By: _____

RISK MANAGER
EL DORADO COUNTY

RECEIVED
HUMAN RESOURCES DEPT.
SEP 11 AM 3:27

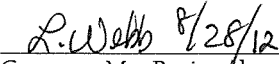
Please call Shirley Hodgson at x7143 to pick up. Thanks.

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

Departments: _____

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

 8/23/12
Contracts Review/date

 8/28/12
Contracts Mgr Review/date