Contract Number: 07-1491
Index Code: 401111

CONTRACT ROUTING SHEET

Date Prepared: January 15, 2008 **Need Date:** Grant begins 2/1/08

PROCESSING DEPARTMENT:
Department: Public Health
Dept. Contact: Dan Buffalo
Phone #: 621-6226
Department Head Signature: Gayle Erbe-Hamlin

CONTRACTOR:
Name: Calif. HealthCare Foundation
Address: 1438 Webster Street, Suite 400
Oakland, CA 94612
Phone: (510) 238-1040

2008 JAN 15 PM 5:25
EL DORADO COUNTY COUNSEL

CONTRACTING DEPARTMENT: Public Health
Service Requested: Review – authority to execute
Contract Term: 7 months Contract Value: $49,998
Compliance with Human Resources requirements? Yes: ____ No: X
Compliance verified by: N/A – Incoming Grant

COUNTY COUNSEL: (Must approve all contracts and MOU's)
Approved: ✓ Disapproved: ____ Date: 1-18-08 By: [illegible]
Approved: ____ Disapproved: ____ Date: ____ By: ____

ASSIGNMENT
DATE 01-15-2008
ATTORNEY LD Kuntz
DEPT./INDEX NO. 401111
BY: [illegible]

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)
Approved: ✓ Disapproved: ____ Date: 1/24/08 By: [illegible]
Approved: ____ Disapproved: ____ Date: ____ By: ____

2008 JAN 23 PM 2:08

N/A – INCOMING GRANT FUNDING

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).
Departments: ____
Approved: ____ Disapproved: ____ Date: ____ By: ____
Approved: ____ Disapproved: ____ Date: ____ By: ____