

Contract #: 209-51711
Index Code: 402131

CONTRACT ROUTING SHEET

Date Prepared: 8/18/16 ^{10/25/16 Resubmitted} 9/15/16 - Counsel

Need Date: 9/29/16 11/4/16

PROCESSING DEPARTMENT:

Department: HHS/PHD
Dept. Contact: Jennifer Anderson
Phone #: X6901
Department
Head Signature: Patricia Charles-Heathers
Patricia Charles-Heathers, Ph. D.,
Director

CONTRACTOR:

Name: Patagonia Health
Address: 15100 Weston Parkway, #204
Cary, NC 27513
Phone: 919-439-1251

CONTRACTING DEPARTMENT: HHS/Public Health Division

Service Requested: Subscription software services for electronic medical record systems
Contract Term: Upon execution - 5 years Contract/Grant Value: 105,650 ~~\$315,475~~
Compliance with Human Resources requirements? N/A Yes No:
Compliance verified by: _____

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

Approved: Disapproved: Date: 9/20/16 By: [Signature]
Approved: Disapproved: Date: 10/27/16 By: [Signature]

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)
Approved: _____ Disapproved: _____ Date: 10-31-16 By: [Signature]
Approved: _____ Disapproved: _____ Date: _____ By: _____

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

NOTE: Any contract that involves the development, installation, implementation, storing, retrieving, transfer, or sending of electronic information, the acquisition of software or computer related items, or any other service/item that may be IT related, especially those that involve computers and telecommunications, must be approved by IT before submission to Counsel. This also applies to any other contract that requires approval from another department.

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

Please contact (Jennifer Anderson x6901) with questions or for contract packet pick-up. Thank you!

[Signature] 9/15/16 9/12/16 [Signature] 9/12/16
CFO Review Date Deputy Director, Administration and Contracts Date

Contract #: _____
Index Code: 402131

CONTRACT ROUTING SHEET

Date Prepared: 8/18/16

Need Date: _____

PROCESSING DEPARTMENT:

Department: HHSA/PHD
Dept. Contact: Jennifer Anderson
Phone #: X6901
Department
Head Signature: _____

CONTRACTOR:

Name: Patagonia Health
Address: 15100 Weston Parkway, #204
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Patricia Charles-Heathers, Ph.D.,
Director

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Departments: IT – Information Technologies

Approved: ✓ Disapproved: _____ Date: 8/22/16 By: [Signature]
Approved: _____ Disapproved: _____ Date: _____ By: _____

Please contact (Jennifer Anderson x6901) with questions or for contract packet pick-up. Thank you!

CFO Review _____ Date _____

Deputy Director, Administration and Contracts _____ Date _____