Contract No: State boilerplate

Index Code: 419100

CONTRACT ROUTING SHEET

Date Prepared:	March 12, 2010	Need Date	e: <u>3/26/10</u>
PROCESSING D	DEPARTMENT:	CONTRAC	CTOR:
Department:	Health Svcs Dept – MH Div.	Name:	Other California counties
Dept. Contact:	Thomas Michaelson	Address:	
Phone #:	62.03	<u>-</u>	future contracts with other
Department		Phone:	counties regarding services
•			provided to minors living out of
	100+		their county of origin - Standard
Head Signature:	Apolla 15/05/	-	agreement will be used when B
3.12.	Neda West, Director		is a contracting asency or the
			is a contracting agency or the service provider.
CONTRACTING	DEPARTMENT: Health Services	Department -	- Mental Health Division
Service Request	ed: State boilerplate contract revie	ew/approval	
Contract Term: _			ontract Value: Varies
Compliance with	Hurnan Resources requirements?	Yes	N/A No:
Compliance verif			
COLLET	OFI () 4	11101111	Car C
	SEL: (Must approve all contracts a		_ (1, 7, 3)
Approved:		Date: <u>3-/6</u>	-10 By: Williams
Approved:	Disapproved:	Date:	By: &
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			G- 11.
5,5,5			
	D TO RISK MANAGEMENT. THANKS!	, , , , , , ,	
	MENT: (All contracts and MOU's ex		
Approved:			7/10 By: ///
Approved:	Disapproved: 1	Date:	By:
· · · · · · · · · · · · · · · · · · ·			
			<u> </u>
			2 0
API			
	VAL: (Specify department(s) partic	ipating or direc	ctly affected by this contract).
Departments: _			
Approved:		Date:	By:
Approved:		Date:	By:
-			
	-		
	Program Mgr/Date	Finance/Dat	e