## CONTRACT ROUTING SHEET

Date Prepared:	8/24/09	Need Da	te: 9/4/09 54	mulus funding
PROCESSING DI	EPARTMENT:	CONTRA	CTOR:	
Department:	Human Services	Name:	CA Dept. of Cor	nmunity
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Dept. Contact:	Amy Higdon	Address:		10 kg/, 1/6,
Phone #:	x4836		Sacramento, CA	95823-1947
Department	1 x . Ol lika	Phone:	916-341-4200	
Head Signature:	Canul Mas			
	Daniel Nielson			3
CONTRACTING I	DEPARTMENT:	Human Services		
Compliance with I	Human Resources requirem		X N	0:
	ed by: Mike Strella 8/24/09			
COUNTY COUNS	EL: (Must approve all cont	roots and MOLUS		
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	RA BENTO x7312 or AMY HIGDO AL: (Specify department(s)			in contract\
Departments:	AL. (Openity department(s)	participating or tine	ony aneoled by th	is contract).
Approved:	Disapproved:	Date:	By:	
Approved:	Disapproved:	Date:	By:	