

CONTRACT ROUTING SHEET

Date Prepared: 4/20/09

Need Date: ASAP-Economic Stimulus Funds

PROCESSING DEPARTMENT:

Department: Human Services
Dept. Contact: Amy Higdon
Phone #: x4836
Department: Human Services
Head Signature: Janet Walker-Conroy
Janet Walker-Conroy

CONTRACTOR:

Name: California Dept. of Aging
Address: 1300 National Drive, Suite 200
Sacramento, CA 95834
Phone: 916-419-7500

CONTRACTING DEPARTMENT: Human Services

Service Requested: Approve agreement/resolution for submission to Board of Supervisors
Contract Term: 4/1/09 to 9/30/10 Contract Value: \$60,671
Compliance with Human Resources requirements? Yes: x No: _____
Compliance verified by: Approved by Cheryl Dorosh 4/17/09

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

Approved: ✓ Disapproved: _____ Date: 4/23/09 By: D. Linderson
Approved: _____ Disapproved: _____ Date: _____ By: _____

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

Approved: ✓ Disapproved: _____ Date: 4/24/09 By: C. Costello
Approved: _____ Disapproved: _____ Date: _____ By: _____

Certificate of Self Insurance attached.

PLEASE CALL AMY HIGDON AT x4836 FOR PICK UP. THANKS!

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

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

RECEIVED
HUMAN RESOURCES DEPT
09 APR 24 AM 10:31