

CONTRACT ROUTING SHEET

Date Prepared: 08/03/09

Need Date: 08/14/09 *Rush Requested.*
(To BOS 9/15/09) Thank you.

PROCESSING DEPARTMENT:

Department: Probation Department
Dept. Contact: Diane Hofsommer
Phone #: 5957
Department
Head Signature: *[Signature]*

CONTRACTOR:

Name: Elsan Associates, Inc.
Address: PO Box 16
Davis, CA 95616
Phone: 916-806-6679

CONTRACTING DEPARTMENT:

Service Requested: Mandatory evaluation research required for Community Alliance to Reduce Truancy (CART) grant claims by CA Dept of Corrections & Rehabilitation/Corrections Standards Authority.

Contract Term: 10/01/09 - 09/30/12 Contract Value: \$105,000.00

Compliance with Human Resources requirements? Yes: No:

Compliance verified by: (Sole Source Vendor) (see email to Chris Little, HR)

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

Approved: Disapproved: Date: 8/14/09 By: *[Signature]*
Approved: Disapproved: Date: By:

see memo

2009 AUG 14 AM 10:10
ELSAN ASSOCIATES INC

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: Disapproved: Date: 8/18/09 By: *[Signature]*
Approved: Disapproved: Date: By:

2009 AUG 11 AM 11:07

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

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