

ASSIGNMENT

DATE 5/22/07

Contract Name: Domestic Violence Services

ATTORNEY Res

Contract # 606-PHD0507

Budget Code: 7740300

DEPT./INDEX NO. 401111

CONTRACT ROUTING SHEET

BY: LF

PROCESSING DEPARTMENT:

Department: Public Health

Dept. Contact: Dan Buffalo

Phone #: 621-6226

Department Head Date: May 18, 2007

Signature: [Signature]

CONTRACTOR:

Name: Womenspace Unlimited

Address: 2941 Lake Tahoe Blvd

South Lake Tahoe, CA 96150

Phone: (530) 544-2118

CONTRACTING DEPARTMENT: Public Health

Compliance with Human Resources requirements? Yes No

Compliance verified by: HR and Local 1

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

Approved: Disapproved: Date: 6/06/07 By: [Signature]

Approved: Disapproved: Date: By:

** see comments on attached copy of Agreement for required corrections*

-Dovey 6/25/07 DB

note: insurance cert. shows policy expiring 06/30/07, 10 days notice for cancellation

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

Approved: Disapproved: Date: 6/7/07 By: [Signature]

Approved: Disapproved: Date: By:

Do not proceed with Contract services until you receive proof of current WC coverage. All other coverage expires in less than 30 days. Renewed coverage should include 30 day notice of cancellation per contract terms instead of the current 10 days.

RECEIVED
HUMAN RESOURCES DEPT
07 JUN -6 PM 3:48

EL DORADO COUNTY COUNSEL
COUNSEL MARY

WC coverage received. DB 6/26/07

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

DEPARTMENT:

Approved: Disapproved: Date: By:

Approved: Disapproved: Date: By: