

Internal Contract No: A1, 017-111-P-E2011

Purchasing Contract No: 164-S1211

Index Code: 408110

# CONTRACT ROUTING SHEET

Date Prepared: 1/13/12

Need Date: 1/27/12

### PROCESSING DEPARTMENT:

Department: HHSA - Public Health

Dept. Contact: Kathy Lang x 6362

2<sup>nd</sup> Contact: Zhana McCullough

Location: 941 Spring St, Ste 4, Placerville

Department: \_\_\_\_\_

Head Signature: [Signature]

Daniel Nielson, MPA, Director

### CONTRACTOR:

Name: CAL TAHOE

Address: 1901 Airport Road

PO Box 8917

South Lake Tahoe, CA 96158

Phone: \_\_\_\_\_

EL DORADO COUNTY COUNSEL  
2012 JAN 13 PM 2:12

### CONTRACTING DEPARTMENT: Health and Human Services Department

Service Requested: Amend "Indemnity" clause

Contract Term: 9/1/11 - 8/31/16

Contract Value: \$9,990,000.00

Compliance with Human Resources requirements? Yes  No

Compliance verified by: Other

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

Approved:  Disapproved: \_\_\_\_\_ Date: 1/31/2012 By: Trish Beck

Please assign to Trish Beck

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved:  Disapproved: \_\_\_\_\_ Date: 2/3/12 By: Klu

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

RECEIVED  
HUMAN RESOURCES DEPT.  
12 FEB - 1 PM 2:12

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

Departments: \_\_\_\_\_

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

[Signature] Program Manager 12-28-2011 Date

[Signature] Finance 1/6/12 Date

1/9/12 Date