Internal Contract No:

A1 - 097-110-P-

E2010

Purchasing Contract No:

001-S1110

Index Code:

404131, 404136, 404143

CONTRACT ROUTING SHEET 10/11/10 Date Prepared: September 15, 2010 **Need Date:** PROCESSING DEPARTMENT: **CONTRACTOR:** Department: Health Svcs - Public Health Name: Progress House, In. Dept. Contact: Kathy Lang x 6362 Address: 2844 Coloma Street 2nd Contact: Tom Michaelson Placerville, CA 95667 Department Phone: Head Signature: \angle Neda West, Director CONTRACTING DEPARTMENT: **Health Services Department** Service Requested: Amendment to AOD Counseling Agreement Contract Term: 7/1/10 - 6/30/11 Contract Value: \$187,204.00 Compliance with Human Resources requirements? Yes X No: Compliance verified by: Feasibility Analysis Attached COUNTY COUNSEL: (Must approve all contracts and MOU's) Approved: Disapproved: Date: Approved: Disapproved: Date: PLEASE FORWARD TO RISK MANAGEMENT. THANKS! RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements) Disapproved: Approved: Date: 10/13/10 By: Approved: Disapproved: Date: Endersement namon as additived executed Resubmit to Risk Ingut & Endorsement 10/14/10. (B) OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract). Departments: Approved: Disapproved: Date: Bv: Approved: Disapproved: Date: By: 9/roka Finance date