Internal Contract No: Purchasing Contract No: 460-M1111

082-162-M-N2011

## 419100 Index Code: **CONTRACT ROUTING SHEET**

| Date Prepared:                             | 8/23/11   | Need Date:                   | 9/6/11   | 12 8   |
|--|---|------------------------------|--|--------|
| PROCESSING DI<br>Department:               | EPARTMENT: Health Svcs - Mental Health                      |                              | <b>OR:</b><br>larshall / Placerville Pl<br>DSO | D/ [3] |
| Dept. Contact:<br>2 <sup>nd</sup> Contact: | Kathy Lang x 6362 Tom Michaelson                            | Address:                     |  | 51     |
| Department<br>Head Signature:              | Meda West, Director   | Phone:                       |  |        |
|  | DEPARTMENT: Health Served: Collaboration on procession      |                              | ted for 5150                                   |        |
|  | on signature - perpetual                                    | Cont                         | ract Value: \$0.00                             |        |
|  | Human Resources requiremen                                  | ts? Yes                      | No:  |        |
| Compliance verific                         |   |                              |  |        |
| COUNTY COUNS                               | SEL: (Must approve all contrac                              | cts and MOU's)               | , ,  |        |
| Approved:                                  | Disapproved:  |                              | 5 / H By:                                      | 2)     |
| Approved:                                  | Disapproved:  | Date:                        | By:  |        |
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|  |   |                              |  | 2 8 2  |
|  | TO DICK MANAGEMENT. THANK                                   | (0)                          |  |        |
| PLEASE FORWARD                             | O TO RISK MANAGEMENT. THANK<br>IENT: (All contracts and MOU | ত।<br>'s excent boilerplate। | grant funding agreeme                          | ents)  |
| Approved:                                  | Disapproved:  | Date: 824 N                  | By: Klu  |        |
| Approved:                                  | Disapproved:  | Date:                        | By:  |        |
| Approved.                                  | Bisapprovou.  | Duto.                        |  |        |
|  |   |                              |  |        |
|  |   |                              |  |        |
|  |   |                              |  |        |
|  |   |                              |  |        |
| OTHER APPRO\ Departments:                  | /AL: (Specify department(s) p                               | articipating or directly     |  | ract). |
| Approved:                                  | Disapproved:  | Date:                        | By:  |        |
| Approved:                                  | Disapproved:  | Date:                        | By:  |        |
|  |   |                              |  |        |
| V 0  | 1. 1.   |                              |  |        |
| Theliber                                   | 9/23//  |                              |  | Doto   |
| Program Manage                             | er Date/  | Finan                        | ce   | Date   |