Internal Contract No: A-1, 801-PHD1008 Purchasing Contract No: 483-00910 Index Code: 403310

## CONTRACT ROUTING SHEET

Date Prepared:	July 20, 2011	Need Date:	
PROCESSING D		CONTRACTOR:	
Department:	Health Svcs Dept - PH Div.	Name: Marshall Medical Center	
Dept. Contact:		Address: 1100 Marshall Way Placerville, CA 95667	
Phone #	621-6362		
Department		Phone:	
Head Signature:		表 2、 多	
	Neda West, Director		
PER AN ALL SHOP SHOP		and Dant Bublic Health Div	ision
CONTRACTING	DEPARTMENT: Health Service	ces Dept - Public Health Div	ISION AND ADDRESS OF THE PARTY
Service Requeste	d: Level III Trauma Designati	Contract Valu	ie: \$0
Contract Term:	12/1/08 - 5/3/12		No:
Compliance with	Human Resources requirement	nies -	And grant with the same of the same
BEAT TO THE PARTY OF THE PARTY	ed by: N/A no exchangerof mo		
COUNTY COUN	SEL: (Must approve all contrac	ts and MOU's)	1 4 8-06
Approved:	Disapproved:	ts and MOU's)  Date: 7/4/// Date:	By: Monsey
Approved:	Disapproved:	Date: //	By:
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CELEVATION CONTRACTOR			
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Approved:	Disapproved:	Date:	By:
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OTHER APPRO	VAL: (Specify department(s) p	articipating or directly affected	ed by this contracti.
Departments:	A. C. L. C.		
Approved:	Disapproved:	Date:	Bÿ:
Approved:	Disapproved:	Date:	_ By:
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