Contract #: n/a
Index Code: 403310

CONTRACT ROUTING SHEET

Date Prepared:	2/8/13	Need Date:	2/22/13
PROCESSING DI Department: Dept. Contact: Phone #: Department Head Signature:	EPARTMENT: HHSA/Public Health Kathy Lang X7147 Daniel Nielson, M.P.A., Directo	Address:	Plan Update
Service Requeste Contract Term:	DEPARTMENT: Health and	Medical Services Plan Contract/Grant Va	
Approved: Approved:	Disapproved: Disapproved:		By: Lish Bede
RISK MANAGEM Approved:	PLEASE FORWARD TO RISK PLENT: (All contracts and MOU's Disapproved: Disapproved:		
NOTE: All contracts	AL: (Specify department(s) pares that involve the acquisition of softward involve the acquisition of softward involved from another department Disapproved: Disapproved:	are or computer related items	must be first approved by IT.
M Review/Date Rev. 12/2000 (GS-GVP)	1/51/ CFO Review/Date	Contracts Supe Review/Date	Contracts Mgr. Review/Date 12-1555 D 1 of 1 21713

Rev. 12/2000 (GS-GVP)