Internal Contract No: 11-10405

Purchasing Contract No:

322-F1211 402141

Index Code:

## **CONTRACT ROUTING SHEET**

Date Prepared:		Need Dat	Need Date:	
PROCESSING DEPARTMENT:		CONTRA	CONTRACTOR:	
Department:	Health Human Srvcs (PH)	Name:	CA Dept Public Health	
Dept. Contact:	Kathy Lang x 6362	Address:		
2 <sup>nd</sup> Contact:	Zhana McCullough		Bldg P, 3 <sup>rd</sup> Floor	
Department	1 - 01 14	Phone:	Richmond, CA 94804-6403	
Head Signature; What has head Signature;				
Daniel Nielson, MPA, Director				
CONTRACTING DEPARTMENT: Health and Human Services Department				
Service Requested: Funding for Childhood Lead Poisoning Prevention Program				
Contract Term: 7/1/11 - 6/30/14 Contract Value: \$60,000.00				
Compliance with Human Resources requirements?  Yes  No:				
	ed by: N/A - Incoming Funding			
COUNTY COUNSEL: (Must approve all contracts and MOU's)				
Approved: Disapproved: Date: Date: By: By: By: Disapproved: Date:				
Approved:	Disapproved:	_ Date:/	By:	
Du notes as marked nu musage to				
1/atte 1				
01-10-2012				
The regured change was made by				
CPPH. The requested change was not				
PLEASE FORWARD TO RISK MANAGEMENT. THANKS! Make 3 mg RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)				
Approved:	Disapproved:	_ Date: 기기년	-	
Approved:	Disapproved:	_ Date:	By:	
Funding Agmt – No Risk Mgmt Review Required				
OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).				
Departments:				
Approved:	Disapproved:	Date:	By:	
Approved:	Disapproved:	Date:	By:	
1		(Dani	11 DEC 13 64 X 10 C	
Vnu_	12/5/11	Jaule	12/5/11	
Program Manager	/ Daté	Fin	ance Tdate Tdate	

11-10405 Rev. 7/30/10 (GS-GVP)