	, r
	Contract #: pending
	Index Code: 419500
CONTRACT DOL	
CONTRACT ROUTING SHEET	
Date Prepared: 9/9/14	Need Date: 9/25/14
PROCESSING DEPARTMENT:	CONTRACTOR:
Department: HHSA/Mental Health	Name: Mental Health Commission
Dept. Contact: Sharon Keoppel	Address: Resolution
Phone #: Ext. 4811	Phone:
Department Head Signature:	
Don Ashton, M.P.A., Director	- Touset Bas Date of Oat. 215
	A 0-1. 2/5-
CONTRACTING DEPARTMENT: HHSA/Mental Health	
Contract/Grant Value:	
Compliance with Human Resources requirements?	N/A x Yes No:
Compliance verified by:	
COUNTY COUNSEL: (Must approve all contracts and MOU's)	
	ate: 9/23/14 By: Dayle & harth
	ate: By: 8
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	<u> </u>
PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!	
RISK MANAGEMENT: (All contracts and MOU's exce	
	ate: $\frac{9/24/14}{By}$ By: $\frac{9}{By}$
Ot-NOtin Jor	
<b>OTHER APPROVAL:</b> (Specify department(s) particip <b>NOTE:</b> Any contract that involves the development, installation,	
electronic information, the acquisition of software or computer	related items, or any other service/item that may be IT
related, especially those that involve computers and telecommu	inications, must be approved by IT before submission to
Counsel. This also applies to any other contract that requires ap Departments:	proval from another department.
	ate: By: 👻 👸
	ate: By: 5
	<u> </u>
Please contact Sharon K. ext. 4811 with questions or for contract packet pick-up. Thank you!	
CFO Review Date AND A FUN main 9/22/14	22 9/22/14
CFO Review Date A	assistant Director-Admin/Finance Date
Rev. 12/2000 (GS-GVP)	14-1254 A 1 of 1P9/12