			A1 to 277-01511	
		Index Code:		<u>- 6</u>
	CONTRACT	ROUTING S	HEET	
Date Prepared:	Nov. 25, 2014	Need Date:	PLEASE RUSH	
PROCESSING D Department: Dept. Contact: Phone #: Department Head Signature: CONTRACTING Service Requester Contract Term: Compliance with Compliance verifi		Address: 108 Alar Phone: 520 or ental Health Division re:PHF. A1 allows Teleo at PHF. 1. Contract/Gra 2020 ents? N/A v the Board 8/26/14 (14-0	ecare Corporation, Inc. 0 Marina Village Parkway meda, CA 94501 -337-7950 eare to use existing County nt Value: \$0 Yes x No:	
RISK MANAGEN Approved: Approved:		RISK MANAGEMENT. THAN U's except boilerplate gr Date: 121414 Date:	ant funding agreements)	
NOTE: Any contract electronic informatio related, especially th	VAL: (Specify department(s) t that involves the development, ins n, the acquisition of software or o tose that involve computers and te applies to any other contract that re Disapproved: Disapproved:	stallation, implementation, stor computer related items, or an elecommunications, must be	ring, retrieving, transfer or send ny other service/item that may i approved by IT before submissi	be IT on to
Laurilla	H 11/25/14 Date	e Program Mgr II, Admin &		[14] Te

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