Contract #: Index Code:

268-M1510

de: 403310

CONTRACT ROUTING SHEET

Date Prepared:	12-09-2014 TOCOCO 12/20/14	Need Date	e: Please Rush
PROCESSING DI Department: Dept. Contact: Phone #: Department Head Signature:	HHSA/Public Health	CONTRAC Name: Address: Phone:	Barton Healthcare System
Contract Term: \	d: Designating Barton as a Leve Jpon signature – 10/10/2020 Human Resources requirements?	l III Trauma,Ce Contract	/Grant Value: \$0
Approved: X Approved:			By: 50 60 100 100 100 100 100 100 100 100 100
RISK MANAGEM Approved: Approved:	/	xcept boilerpla Date: 1/3/ Date: 1/5/	THANK YOU! te grant funding agreements) By: By: By:
NOTE: Any contract electronic information related, especially the	n, the acquisition of software or comput ose that involve computers and telecom opplies to any other contract that requires	on, implementation fer related items, munications, mus	n, storing, retrieving, transfer, or sending o or any other service/item that may be list st be approved by IT before submission to
	contact (NAME + EXT) with questions	or for contract p	- 125 E

B Waling Johnly