		C	ptract # / 7
		Inde	ex Code: 4033-10
CONTRACT ROUTING SHEET			
Date Prepared:	12/16/14	Need Da	ite: 1/6/14
PROCESSING DEPARTMENT: Department: HHSA/Public Health		CONTRA Name:	ACTOR: Goodell, Porter, Sanchez & Bright
Dept. Contact: Phone #:	Kathryn Lang Ext. 7147	Address	2 7801 Folsom Blvd, Suite 302 Sacramento, CA 95826
Department Head Signature:	ACAA	Phone:	916-387-7000
nead Oignature.	Don Ashton, M.P.A., Dire	ector	4 DEC
CONTRACTING DEPARTMENT: HHSA/Public Health Division 2 Service Requested: Audit Services for EMS Agency 3			
Contract Term: Three years Contract/Grant Value: \$155,000			
	Human Resources require		
COUNTY COUNSEL: (Must approve all contracts and MOU's) Approved: Disapproved: Date: Approved: Disapproved: Date: By: Disapproved: By: By: Disapproved: Disapproved: By: Disapproved: Disapproved: Disapproved: Date: By: By: Disapproved: Disapproved: By: Disapproved: Di			
			PN c
2	PLEASE FORWARD T	O RISK MANAGEMENT	ω o
RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)			
Approved:	Disapproved:		18/14 By: 22
Approved:	Disapproved:	Date: 1013	30/14 Ву: 9-4
() relation	nent wr.		
Dreed Pa	of ligs - they g	QUE US EPL:	I (different roverage)
OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).			
NOTE: Any contrac electronic informatio related, especially th	t that involves the development, in, the acquisition of software of	installation, implementation or computer related item d telecommunications, m	ion, storing, retrieving, transfer, or sending o s, or any other service/item that may be I ust be approved by IT before submission to
Approved:	Disapproved:	Date:	By:
Approved:	Disapproved:	Date:	By:
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And	the lui		+ + + + + + + + + + + + + + + + + + +
CFO Review	Date Date	Manager, Admin	istration and Contracts Date

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