Contract #: Index Code:

268-F1411, A1

401133

CONTRACT ROUTING SHEET

Date Prepared:	11-06-2014	Need Date:	12-16-2014
PROCESSING D Department: Dept. Contact: Phone #: Department Head Signature:	EPARTMENT: HHSA Zhana Mc Cullough 7154 Don Ashton, M.P.A., Director	Address: 7: N Phone:	OR: ounty of Alpine 5 A Diamond Valley Road larkleeville, CA 96120
Contract Term: _ Compliance with	· · ·	rdinator support servi Contract/G ts? N/A <u>X</u>	rant Value: \$75,000 P
COUNTY COUNS Approved: Approved:	SEL: (Must approve all contraction Disapproved: Disapproved: Disapproved:	cts and MOU's), Date: <u>「タ/ン/۱</u> リ Date:	O11 - 10
RISK MANAGEN Approved:X Approved:	PLEASE FORWARD TO RIST JENT: (All contracts and MOU Disapproved: Disapproved:		grant funding agreements)
NOTE: Any contract sending of electronith that may be IT related.	/AL: (Specify department(s) point that involves the development, in the conformation, the acquisition of softed, especially those that involve conformation. This also applies to an incomplete to an incomplete the development of the conformation o	stallation, implementation tware or computer relate mputers and telecommu	on, storing, retrieving, transfer, or ed items, or any other service/item unications, must be approved by IT
Howald Review	11/24/14 Date	Program Manager II	77 / / / / / / Administration and Contracts Date

Pulalia La 11/19/14