Contract #: 417-S1511 Index Code:

530500

## **CONTRACT ROUTING SHEET**

Date Prepared:	3/17/15 TO CONVERT 4-7-15	Need Dat	te: Please Rush - 4	/21/15 (latest)
PROCESSING D	EPARTMENT:	CONTRA	CTOR:	
Department:	HHSA/SSD	Name: Progress House, Inc.		
Dept. Contact:	Jennifer Anderson	Address:	2844 Coloma Stree	
Phone #:	X6901		Placerville, CA	
Department		Phone:	530-626-8992	
Head Signature:	9000			······································
Ü	Don Ashton, M.P.A., Director	the state of the s		
	, , , ,			
	DEPARTMENT: HHSA/Social Se			
Service Requeste	ed: Therapeutic counseling service transitional housing.	es, substance	e abuse testing/treatr	ment,
Contract Term:	Upon execution – 3 years	Contrac	t/Grant Value: \$1,0	00 000 00
	Human Resources requirements?	N/A		No:
•	ied by: Judie Engel			
•				
	<b>SEL:</b> (Must approve all contracts a		and the second s	
Approved: 💢		Date: <u>4//0/</u>	15 By: ()	Karlen
Approved:	Disapproved: [	Date:	By:	
				<u> </u>
	PLEASE FORWARD TO RISK M	ANACEMENT	THANK YOU	
DISK MANAGEN	#ENT: (All contracts and MOU's ex			eements)
Approved: X	•		3/15 By:	Jennemus)
Approved:		Date:	By:	Y X
Approved.		Jaic		
				N
				No EE
OTHER APPRO	VAL: (Specify department(s) partic	ipating or dire	ctly affected by this	
	t that involves the development, installation			
	n, the acquisition of software or compute			
	nose that involve computers and telecomn			efore submission t
Departments:	applies to any other contract that requires a	ipprovar irom an	other department.	
Approved:	Disapproved:	Date:	R <sub>V</sub> :	
Approved:		Date: Date:	By:	
Approved.	Disappioved I	Jaic	Бу.	
			21	·
Please cont	act Jennifer Anderson x6901 with quest	ions or for con	tract packet pick-up. T	hank you!
- Wash 1				1211/
XWUWW	2) 4/6/15	Je	And the state of t	4/6//5
CFO Review	Date	Program Manager	II, Administration and Contra	icts Date

Rev. 12/2000 (GS-GVP)

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