Contract #:

024-S1311 A3

Index Code: 4

418920, 418940

CONTRACT ROUTING SHEET

Date Prepared:	4/6/15 TO Course 4/9/15 Hm	Need Date	: 4116/15	s Itw
PROCESSING D	EPARTMENT:	CONTRAC	CTOR:	
Department:	HHSA/Mental Health	Name:	Tahoe Youth Services	and Family
Dept. Contact:	Heather Longo	Address:	1021 Fremon	
Phone #:	X7373		SLT, CA 9615	.,,, .,, .,, .,, ., ., ., ., ., ., .
Department Head Signature:	900	Phone:	530/541-2445	
riead Oighaldre.	Don Ashton, M.P.A., Director			
CONTRACTING	DEPARTMENT: HHSA/Mental H	Health Division		
	ed: Alcohol and Drug Program Se			476,654.00 1
Contract Term:			/Grant Value:	
	Human Resources requirements? ed by:Judie Engel 3/30/15	N/A	Yes x	No:
COUNTY COUNS	SEL: (Must approve all contracts a	and MOU's)		
Approved: 🔍		Date: 4/15/1	S By	: (110 to 15
Approved:	Disapproved:	Date:	By	
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DICK MANACEN	PLEASE FORWARD TO RISK M			a caroomente)
Approved: X	IENT: (All contracts and MOU's ex Disapproved:	Date: 4/15	•	~ / · *
Approved:	· · · · · · · · · · · · · · · · · · ·	Date:	By:	
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OTHER APPROV	/AL: (Specify department(s) partic	ipating or direc	ctly affected by	this contract)
NOTE: Any contract electronic information related, especially th Counsel. This also a Departments:	that involves the development, installation, the acquisition of software or compute ose that involve computers and telecomplies to any other contract that requires	n, implementation er related items, munications, mus	n, storing, retrieving or any other ser t be approved by	ng, transfer, or sending of vice/item that may be IT vIT before submission to
Approved:	Disapproved:	Date:	Bv	
Approved:	Disapproved:Disapproved:	Date:	By	:
/ Please cor	ntact Heather Longo x7373 with question	ons or for contra	ct packet pick-u	p. Thank you!
HOULD OF	4/8/15 Date	Constitution of the Consti	, I, Administration and	4/9/15

1/8/15 NO 4/8/15

Rev. 12/2000 (GS-GVP)