Contract #: 152-S1310 A2

Index Code: 418720

## **CONTRACT ROUTING SHEET**

Date Prepared:	5/4/15	Need Date	5 8 15	Rush Plea	
PROCESSING DEPARTMENT: Department: HHSA/MHD		CONTRAC Name:	CONTRACTOR: Name: Tahoe Youth and Family Services		
Dept. Contact: Phone #:	Heather Longo X7373	Address:		ve	
Department Head Signature:	Don Ashton, M.P.A., Direc	Phone:	530/541-2445		
Contract Term: _7 Compliance with F	d: Specialty Mental Health	Contract	/Grant Value: ∰ Yes <u>x</u>	No:	
COUNTY COUNS Approved: Approved:	EL: (Must approve all con Disapproved: Disapproved:		By: 4 By:	19 19 19 19 19 19 19 19 19 19 19 19 19 1	
	PLEASE FORWARD TO	RISK MANAGEMENT.	THANK YOU!		
Approved:Approved:	ENT: (All contracts and Mo Disapproved: Disapproved:	DU's except boilerplat Date: 5 4 Date:	e grant funding a  By: (	agreements)	
				water 1	
<b>NOTE:</b> Any contract electronic information related, especially the	AL: (Specify department(s) that involves the development, in the acquisition of software or use that involve computers and upplies to any other contract that represents the contract of the contract that represents the c	stallation, implementation computer related items, telecommunications, mus	n, storing, retrieving, or any other service t be approved by IT	transfer, or sending of e/item that may be IT	
Approved:	Disapproved:	Date:	By:		
Approved:	Disapproved:	Date:	By: _		
Please con	tact Heather Longo x7373 with	questions or for contra	ct packet pick-up.	Thank you!	

Date

Program Manager II, Administration and Contracts