Contract #:

370-S1611

Index Code:

530500

CONTRACT ROUTING SHEET

Date Prepared:	2/8/16	Need Date	: 226/16	***************************************	
PROCESSING DEPARTMENT:		CONTRAC	CONTRACTOR:		
Department:	HHSA/CSD	Name:	EDCA Lifeskills		
Dept. Contact:	Jennifer Anderson	Address:	893 Spring St		
Phone #:	X 6901		Placerville, CA 956	67	
Department	\cap	Phone:	530-622-8193		
Head Signature:	3.000	-			
3	Don Ashton, M.P.A., Directo	ir			
CONTRACTING	DEPARTMENT: HHSA/Soc	cial Services Divisio	n		
	d: Therapeutic Counseling		***************************************		
Contract Term: 4			/Grant Value: \$300	0.000	
	Human Resources requireme		Yes x	No:	
	ed by: Approved by Julie Pa		100 <u>X</u>		
	-	-	***		
	SEL: (Must approve all contra		1 p M	TDP	
Approved:	Disapproved:		By: (12)	ORCHE	
Approved:	Disapproved:	Date:	By:		

			·		
			<u></u>	Comment of the commen	
				and the second s	
				<u> </u>	
	PLEASE FORWARD TO R	ISK MANAGEMENT. 7	THANK YOU!		
RISK MANAGEM	ENT: (All contracts and MO			eements)	
Approved:	Disapproved:	, , ,	• • •	THOO LO	
Approved:	Disapproved:	Date:	By:		
	• • • • • • • • • • • • • • • • • • • •	ALLEN TO THE TOTAL THE TOT			
OTUED ADDDON	(A) - (Cif		-4l 4		
	'AL: (Specify department(s)				
	that involves the development, inst n, the acquisition of software or co				
	ose that involve computers and tel				
	pplies to any other contract that rec				
Departments:				20 A	
Approved:	Disapproved:	Date:	By:		
Approved:	Disapproved:	Date:	By:	Action Company	
				NO NO	
Please conta	ct (Jennifer Anderson x6901) with	h questions or for conf	tract packet pick-up. ⁻	Γhank you!	
Samon OU	2/18/16	pulli-interaction control of the con			
CFO Review	2 [[8]] Q Date	Deputy Director, Ac	Iministration and Contracts	77176 Date	

@ 2/11/16

16-0211 A 1 of 1