		Contract #:	290-M1410			
		Index Code:	418720, 41950	0-419800		
,	CONTRACT DO			41990-419800 -		
-	CONTRACT RO	UTING 3	DIELI	119300 7 Ner		
Date Prepared:	Thu <del>rsday, October 17</del> , 2013	Need Date:	11/12/13			
PROCESSING D	EPARTMENT:	CONTRACT	OR:			
Department:	Health & Human Services Agency	Name: C/	A Dept Health Car	e Svcs (DHCS)		
Dept. Contact:	Kathy Lang		501 Capitol Ave, S S 1403	uite 71.5195,		
Phone #:	X 7147	P	O Box 997413			
Department	- 1	Phone: Sa	acramento, CA 95	899-7413		
Head Signature:	9_cet					
	Don Ashton, M.P.A., Interim Direc	tor				
CONTRACTING DEPARTMENT: Health and Human Services Agency – Mental Health Service Requested: Performance Agmp – State #13-90303						
Contract Term:			rant Value: \$0			
	Human Resources requirements?	N/A 🛛	Yes	No:		
Compliance verified by: Approved as to form as an adhesion contract that sale						
COUNTY COUNS	SEL: (Must approve all contracts a		I not change	despite oftenas		
Approved:		Date: 11/5/13	By: ( <i>fa</i>	uli This Ne		
Approved: X		Date: 1/25/13	By (PO)	anti ()		
Pg 13 8x1		the standard	crear insu	ill		
Ands, second Its make contract voidable. The is a second, No						
inconsistent, Och B. on pg 22. Need to realler these inconsistences						
See office comments in Exh A., scope of WE.						
Pa 18-21	are repeated on Pars -	10-79	test warden	The second secon		
PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!						
<b>RISK MANAGEMENT:</b> (All contracts and MOU's except boilerplate grant funding agreements)						
Approved:	Disapproved: [	Date:	By:	° – G		
Approved:		Date:	By:	5 0 H		
	nothing for Risk	to Appro	Ne	<u>s</u> s m		
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	an a	0	0	*		
OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract). NOTE: Any contract that involves the development, installation, implementation, storing, retrieving, transfer, or sending of electronic information, the acquisition of software or computer related items, or any other service/item that may be IT related, especially those that involve computers and telecommunications, must be approved by IT before submission to Counsel. This also applies to any other contract that requires approval from another department.						
	Submitted to IT for review 10/17/13.			PI UR		
Approved:	Disapproved: [	Date:	By:			
Approved:	Disapproved: [	Date:	By:			
				ω -		
Applian 10/2	1/2 Othis diale Hard 10/23/13	Karen 9. Mr	- Shin	int		

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Program Mgr, Review/Date

Contracts Mgr. Review/Date

CPO Review/Date 0/30/13

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		Contract #: Index Code:	290-M1410 418720, 419500-4198		
	CONTRACT DO				
	CONTRACT RO	UTING	SHEEL		
Date Prepared:	Thursday, October 17, 2013	Need Date			
PROCESSING D	EPARTMENT:	CONTRAC	TOR:		
Department: Dept. Contact:	Health & Human Services Agency				
	Kathy Lang		1501 Capitol Ave, Suite 71.5195, MS 1403		
Phone #: Department Head Signature:	X 7147		PO Box 997413		
		Phone:	Sacramento, CA 95899-7413		
	Don Ashton, M.P.A., Interim Dire	ctor			
CONTRACTING	ed: Performance Agmt – State #1		gency – Mental Health		
Contract Term:			nct/Grant Value: \$0		
	Human Resources requirements?				
Compliance verifi	ed by:	-			
COUNTY COUNS	SEL: (Must approve all contracts a	and MOU's)			
Approved:		Date:	By:		
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	PLEASE FORWARD TO RISK N	ANAGEMENT. T	HANK YOU!		
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	AL: (Specify department(s) partic	cinating or direct	by affected by this contract)		
	t that involves the development, installa				
sending of electronic	c information, the acquisition of softwar	e or computer rela	ted items, or any other service/item		
	ed, especially those that involve compu o Counsel. This also applies to any oth				
department.					
	pubmitted to IT for review 10/17/13				
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Contracts Supe Review/I	Date Program Mgr, Review/Date	Contracts Mgr. Revie	ew/Date CFO Review/Date		
Rev. 12/2000 (GS-GVP)					

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