



## CONTRACT ROUTING SHEET

Date Prepared:	04/03/08	Need Dat	te: ASAP - Please
PROCESSING D Department:	EPARTMENT: Sheriff	CONTRA Name:	CTOR: St of CA Office of Emergency Services
Dept. Contact: Phone #:	Mary Pierce 5691	Address:	3650 Schriever Avenue
Department Head Signature:	Joseph a m	Phone:	916-324-6724
CONTRACTING			-3
Service Requested: Approval of annual Anti-Drug Abuse Grant Award			
	07/01/07 - 06/30/08	Contract Value	
Compliance with I	Human Resources requirements?  ed by:	Yes:	NA No: 2
Approved:	Disapproved:	and MOU's) Date: 4/9 Date:	By: Vultage Ken
TORNEY CONTROL OF THE PT. MIDEX NO. OF THE PT. MIDE	of wan Now R	Ne is Missper	hody changed at beginning
PLEASE KORWART	TO RISK MANAGEMENT. THANKS!	7742	te grant funding agreements)
RISK MANAGEM	ENT: (All contracts and MOU's	except boilerpla	te grant funding agreements)
	Disapproved:	Date: _4//	11/08 By: Logitalia
Approved:	Disapproved:	Date: /	By:
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OTHER APPROV Departments:	AL: (Specify department(s) part	icipating or dire	ctly affected by this contract).
Approved:	Disapproved:	Date:	By:
Approved:	Disapproved:	Date:	By: