

CONTRACT ROUTING SHEET

Date Prepared: 5/13/08

Need Date: 5/30/08

PROCESSING DEPARTMENT:

Department: CAO Procurement & Contracts

Dept. Contact: Bonnie Rich

Phone #: X5940

Department Head Signature: John Bachman

CONTRACTOR:

Name: CA Dept of Mental Health

Address: 1600 9th Street

Sacramento, CA 95814

Phone: 916-651-8986

Specified - state grant contract 5/22/08

CONTRACTING DEPARTMENT: Mental Health

Service Requested: Mental Health Services Act Amendment I

Contract Term: 7/1/04 to 6/30/09 Contract Value: \$5,171,662.00

Compliance with Human Resources requirements? Yes: XX No:

Compliance verified by: Michaelson

EL DORADO COUNTY COUNSEL
MAY 22 AM 11:23
Amend Received

COUNTY COUNSEL: (Must approve all contracts and MOU's)

Approved: Disapproved: Date: 5-28-08 By: [Signature]

Approved: Disapproved: Date: By:

ASSIGNMENT

5123 2008
ATTORNEY EO KNOX
DEPT. INDEX NO. 626100
BY: AHD

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)

Approved: Disapproved: Date: 5/29/08 By: [Signature]

Approved: Disapproved: Date: By:

RECEIVED
HUMAN RESOURCE DEPT
08 MAY 22 AM 11:56

OTHER APPROVAL: (Specify department(s) participating or affected by this contract)

Departments:

Approved: Disapproved: Date: By:

Approved: Disapproved: Date: By:

BOS MEM 6/3/08 08-2822