Internal Contract #:

DDC-08/09-09

Index Code:

Contract #: 193 - F-0911 404147

CONTRACT ROUTING SHEET

Date Prepared:	6/24/08	Need Date: 7/	1/08 - PLEASE RUSH
PROCESSING DEPARTMENT:	EPARTMENT: Public Health	CONTRACTOR: Name: Calif D Progra	ept of Alcohol & Drug
Dept. Contact: Phone #: Department Head Signature:	Kathy Lang 621-6362 Gayle Erbe-Hamlin	Address: 1700 k	C Street
CONTRACTING I Service Requeste			
Contract Term: (Contract \	Value: \$93,282 \$ 9 2,65
	Human Resources requirements?		No: x
Approved: Approved: Approved:	BEL: (Must approve all contracts Disapproved: Disapproved:	and MOU's) Date: Date:	By: Lely B. Home
	TO RISK MANAGEMENT. THANKS! IENT: (All contracts and MOU's e	evcent hoilernlate grant	funding agreements
Approved:	Disapproved:	Date: 6/27/0	By:
Approved:	Disapproved:	Date:	By: RECEIVED RESOURCES DEPT
OTHER APPROV	/AL: (Specify department(s) part	icipating or directly affe	cted by this contract).
Approved:	Disapproved:	Date:	By:
Approved:	Disapproved:	Date:	By:

ASSIGNMENT