F. USH! Contract #041-S0911

## CONTRACT ROUTING SHEET

Date Prepared:	4/18/08 9 30 8	Need Dat	e: - <del>5/9/08</del> / 🕏	<del>0</del> 8
Department.	EPARTMENT: CAO/Procevente Mental Health Confracts	Name.	Inc.	•
Dept. Contact:	Tom Michaelson Grunial 1	CA Address:	1767 Tribute Road,	Suite F
Phone #:	Ext 6203, 5940		Sacramento, CA 95	815
Department		Phone:	916-457-1900	
Head Signature: ∠	John Dachn	rom		2008 EL DOI
CONTRACTING I	DEPARTMENT: Mental Health			APR
Service Requeste	d: Employment specialist/job de	eveloper	\$29.625	22-62
Contract Term: 🕧	year 6 mos	Contract Value	: \$5 <del>9,2</del>	250,00€ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
•	tuman Resources requirements?	Yes:	XX No:	
Compliance verific	ed by: Michaelson			13 6 1
	SEL: (Must approve all contracts	and MOU's)	- (1	THE SELL
Approved:	Disapproved:	Date: <u>4</u> -	30-08 By: 40 By:	fry S
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	ENT: (All contracts and MOU's e	Date: 5//	te grant funding agree By:	
Approved:	/ Disapproved: Disapproved:	Date: 3/7	By:	No state of
Approved:	Disapproved.	Date.	Бу.	<del>2</del> 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
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OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).				
Departments: Approved:	Disapproved:	Date:	Ву:	
Approved:	Disapproved:	Date:	By:	
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