## CONTRACT ROUTING SHEET

Date Prepared: 6/25/14
PROCESSING DEPARTMENT:


Need Date: $\quad 727$
CONTRACTOR:
Name: EDCA Lifeskills, Inc.
Address: 893 Spring Street
Placerville, CA 95667
Phone: $530622-8193$

CONTRACTING DEPARTMENT: HHSA/Mental Health
Service Requested: Senior Peer Counselling
Contract Term: Execution-6/30/2017
Compliance with Human Resources requirements?
Contract/Grant Value: $\$ 135,000$

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


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



OTHER APPROVAL: (Specify departments) participating or directly affected by this contract). rim 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.
Departments:


$7 / 1 / 1 / V_{\text {bate }}$

