## CONTRACT ROUTING SHEET



## Need Date: 4/14/09

CONTRACTOR:
Name: El Dorado Union High School
Address: 4675 Missouri Flat Road
Phone: 530-622-5081

CONTRACTING DEPARTMENT: Health Services Department - Mental Health Division
Service Requested: Mental health services for students


Compliance verified by:_ N/A - revenue neutral agreement

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

AGEMENT: (All contracts
Approved: $V$ Disapproved:
Approved: $\qquad$ Disapproved:
$\qquad$ Date:
Date:


By:
By:

$\qquad$
$\qquad$

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


