CONTRACT ROUTING SHEET

Date Prepared:	04-13-09	Need Date	: 04-27-09
PROCESSING DI	EDARTMENT:	CONTRAC	TOR:
	Human Services		Progress House
Dept. Contact:	DeAnn Osborn		2914 B Cold Springs Road/POB 1666
Phone #:	X7338		Placerville, CA 95667
Department 0	00 00	Phone:	530/626-9240
Head Signature	Janet Walker-Conroy		
CONTRACTING DEPARTMENT: Human Services (Social Services)			
Service Requested: Therapeutic counseling, substance abuse treatment and related services			
		Contract Value:	The state of the s
	luman Resources requirements?	Yes:	X No:
Compliance verific	ed by: Cheryl Dorosh		
Approved:	SEL: (Must approve all contracts a Disapproved: Disapproved:	and MOUs) Date:	2405 By: Galfing By:
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			60 6 m
PLEASE FORWARD	TO RISK MANAGEMENT. THANKS! ENT: (All contracts and MOUs ex	roont hollornlate	grant funding agreements
Approved	Disapproved:	Date: Dollerplate	9/09 By Collets
Approved:	Disapproved:	Date:	By:
Approved:	Disapproved.	Date.	
OTHER APPROV	AL: (Specify department(s) partic	cipating or direc	tly affected by this contract).
Approved:	Disapproved:	Date:	By:
Approved:	Disapproved:	Date:	By:
			# W.S