Internal Contract No: Purchasing Contract No:

048-159-M-R2010

Index Code: Funding

367-M1011

## **CONTRACT ROUTING SHEET**

Date Prepared:	July 2,2011	Need Dat	te:	Kuik
PROCESSING DE	PARTMENT:	CONTRA	CTOR:	***
Department:	Health Svcs Dept - MH Div.	Name:	El Dorado Cour	
_			Education	- os
Dept. Contact:	Thomas Michaelson	Address:	6767 Green Val	ley Road
Phone #:	6203	1	Placerville, CA	95667 i g
Department	dalla il I	Phone:	530-295-2236	2 00
Head Signature:	N/N/A/N/LSA			And the second s
N	M Neda West, Director			<del>-</del> c
CONTRACTING I	DEPARTMENT: Health Service	es Department	– Mental Health [	County Division 6
	d: Mental health services for st			744101011 93 m
Contract Term: 7			ontract Value:	
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Compliance verifie			<del></del>	· · · · · · · · · · · · · · · · · · ·
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	EL: (Must approve all contracts	and MOU's)	/ . /	
Approved:	Disapproved:		/ 10 By:	
Approved:	Disapproved:	Date:	By: _	
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<del></del>	Conditional -> Ex	C attached	applies to	the 2007/200
	grant. Need to	aniay con	our grans of	m 2018/2011
FY 10-1	I not received until	Fall 2010 -	attached F)	109-1000
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	TO RISK MANAGEMENT. THANKS!			
	ENT: (All contracts and MOU's		1 · 1 · A	agreements)
Approved:	Disapproved:	Date:	/ <del>/ // // B</del> y: _	Nu SI
Approved:	Disapproved:	Date:	By: _	
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<u> </u>				
OTHER APPROV	AL: (Specify department(s) part	icipating or dire	ctly affected by th	nis contract).
Departments:	(a) -	9	<b>,</b>	
Approved:	Disapproved:	Date:	By:	
Approved:	Disapproved:	Date:	By:	
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	a Jan	Meul	ely of change	700
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	1	in revo	hed Adde	de reconnection
Rev. 12/2000 (GS-GVP)		w/o cau	se provision.	10-0774.A.1