

REVENUE, POLICY, ETC. ROUTING SHEET

Date Prepared: 09/27/2022

Need Date: 10/06/2022

PROCESSING DEPARTMENT:

Department: Health and Human Services Agency
Dept. Contact: Alisha Bryden
Phone: (530) 642-7317
Department Head Signature: Yvette Wencke
Digitally signed by Yvette Wencke
Date: 2022.09.27 08:06:13 -07'00'
Yvette Wencke, Administrative Analyst Supervisor

CONTRACTOR:

Name: CA Department of Social Services (CDSS)
Address: 744 P St, Sacramento, CA 95814
Phone: (916) 651-8848
Org Code: 5130
Project String
(if applicable): _____

CONTRACTING DEPARTMENT: Health and Human Services Agency (Adult Protective Services)

Service Requested: Review of Home Safe Program Director's Certification (for allocation acceptance)

Description: Director's Certification - required to accept allocation for the Home Safe Program - supports homeless Seniors & Adults with disabilities in Adult Protective Services

Contract Term: NA Contract Value: No Contract; Allocation = \$394,567

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

Approved: Disapproved: Date: 10/06/2022 By: Paula Frantz
Digitally signed by Paula Frantz
Date: 2022.10.06 18:34:05 -07'00'
Approved: Disapproved: Date: _____ By: _____

HR APPROVAL:

Compliance with Human Resources requirements? Yes: No:
Compliance verified by: _____

RISK MANAGEMENT APPROVAL: (all contracts & MOU's except boilerplate grant funding contracts)

Approved: Disapproved: Date: _____ By: _____
Approved: Disapproved: Date: _____ By: _____

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).

Departments: Information Technology
Approved: Disapproved: Date: _____ By: _____
Approved: Disapproved: Date: _____ By: _____