

Contract #: 14F-3009, A3 and Resolution

Index Code: 531011

CONTRACT ROUTING SHEET

Date Prepared: 12-11-2014 *12/11/14*

Need Date: Please Rush

PROCESSING DEPARTMENT:

Department: HHSA

Dept. Contact: Zhana Mc Cullough

Phone #: 7154

Department

Head Signature: *[Signature]*
Don Ashton, M.P.A., Director

CONTRACTOR:

Name: CA Dept. of Community Services

Address: 2389 Gateway Oaks Dr., Suite 100

Sacramento, CA 95833

Phone:

CONTRACTING DEPARTMENT: HHSA/Community Services

Service Requested: A3 to Community Services Block Grant Funding Agreement

Contract Term: 01/01/2014 - 05/31/15 Contract/Grant Value: \$265,790

Compliance with Human Resources requirements? N/A Yes No:

Compliance verified by: N/A - incoming funding

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

Approved: Disapproved: Date: 12/20/14 By: *[Signature]*

Approved: Disapproved: Date: By:

EL DORADO COUNTY COUNSEL
DEC 22 AM 10:28

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

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

Approved: Disapproved: Date: 11/21/15 By: *[Signature]*

Approved: Disapproved: Date: By:

Please provide required insurance documents. (Begins on Page D10 of Exhibit D - Standard Agreement, in the copy of the Agreement)

All evidence of insurance already provided to the state at the time of our 7/1/14 Renewal

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

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: _____

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

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

EL DORADO COUNTY DEPT. OF COMMUNITY SERVICES
DEC 22 AM 9:20

[Signature] 12/18/14
CFO Review Date

[Signature] 12/15/14
Program Manager II, Administration and Contracts Date