


Contract #: 008-S1610
Index Code: 530500

CONTRACT ROUTING SHEET

Date Prepared: 4/7/15 4/24/15 ^{To Counsel}
_{received 4/27}

Need Date: 4/30/15

PROCESSING DEPARTMENT:

Department: HHSA/SSD
Dept. Contact: Jennifer Anderson
Phone #: X6901
Department
Head Signature: 
Don Ashton, M.P.A., Director


CONTRACTOR:

Name: Live Violence Free
Address: 2941 Lake Tahoe Blvd
South Lake Tahoe, CA 96150
Phone: 530-544-2118

CONTRACTING DEPARTMENT: HHSA/Social Services Division

Service Requested: Therapeutic counseling services and classes on an "as requested" basis
Contract Term: 7/1/15 to 6/30/18 Contract/Grant Value: \$126,712.00
Compliance with Human Resources requirements? N/A Yes x No:
Compliance verified by: Judie Engel


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

Approved: X Disapproved: Date: 5/4/15 By: 
Approved: Disapproved: Date: By:

EL DORADO COUNTY COUNSEL
JENNIFER ANDERSON
4/27/15

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

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

Approved: ✓ Disapproved: Date: 5/8/15 By: 
Approved: Disapproved: Date: By:

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:

Please contact Jennifer Anderson x6901 with questions or for contract packet pick-up. Thank you!

CFO Review _____ Date _____ Program Manager II, Administration and Contracts _____ Date 4/23/15

Ⓟ 4/17/15
He 4/21/15