

REVIEW AND APPROVAL REQUESTED FOR:

☒ Contract ☐ Amendment ☐ Resolution ☐ Ordinance ☐ Policy ☐ Other

**County Counsel
REVIEW ROUTING SHEET**

Date Prepared: 5/13/25

Need Date: _____

PROCESSING DEPARTMENT

Department: HHSA
Dept Contact: Khrista Ringnes
Phone: x7118
Dept. Signature: Lisa Konyecsni
Title: Sr, Admin Analyst

Org Code: 5130300
Funding Source: State and Federal
PL String: _____
Legistar #: 25-0877

CONTRACT INFORMATIONCONTRACT #: 9572

CONTRACT AMENDMENT #: _____

Contracting Department: HHSA - Protective Services (Child Welfare Services)Contractor/Vendor Name: EDCOEContract Term: upon exec. - 6/30/28Contract Value: \$430,000

Note - HR & RISK review will take place during Fenix Contract workflow - amendments see below.

ORDINANCE/RESOLUTION/POLICY INFORMATION

TITLE / SUBJECT: _____

NUMBER (If Assigned): _____

DESCRIPTION AND ADDITIONAL NOTES FOR COUNTY COUNSELReview of agreement with EDCOE for Child Abuse Prevention Council (CAPC) activities.**COUNTY COUNSEL**

Approved ☒ Disapproved ☐ Date: 5/21/25
Approved ☒ Disapproved ☐ Date: 6/5/25

By: Nicole C. Wright
By: Nicole C. Wright

Digitally signed by Nicole C. Wright
Date: 2025.05.21 14:59:43 -07'00'
Digitally signed by Nicole C. Wright
Date: 2025.06.05 11:43:04 -07'00'

COMMENTSwith comments as noted in email.Approved as to form as revised - 6.26.25 NCW**CONTRACT AMENDMENT ONLY****HR APPROVAL**Compliance with Human Resources requirements? Yes: ☐ No: ☐

Compliance verified by: _____

RISK APPROVAL

Approved ☐ Disapproved ☐ Date: _____
Approved ☐ Disapproved ☐ Date: _____

By: _____
By: _____

COMMENTS