

Contract #: 235-51711
Index Code: 531011, 531430, 41940

CONTRACT ROUTING SHEET

Date Prepared: 8/26/16 To Counsel 9/7/16 HW Need Date: 9/16/16 HW

PROCESSING DEPARTMENT:
Department: HHSA/CS/PH/BH
Dept. Contact: Heather Longo
Phone #: X7373
Department
Head Signature: Patricia Charles-Heathers
Patricia Charles-Heathers, Ph.D.,
Director

CONTRACTOR:
Name: A Helping Hand Homecare, LLC
Address: 6092 Pony Express Trail
Pollock Pines, CA 95726
Phone: 530-647-0266

CONTRACTING DEPARTMENT: HHSA/Community Services/Public Health/Behavioral Health
Service Requested: In-Home and Community Support Services
Contract Term: NA 10/1/16 - 11/30/19 HW Contract/Grant Value: \$927,000.00
Compliance with Human Resources requirements? N/A Yes x No:
Compliance verified by:

COUNTY COUNSEL: (Must approve all contracts and MOU's)
Approved: X Disapproved: Date: 9/12/16 By: [Signature]
Approved: Disapproved: Date: By:

ELCO COUNTY COUNSEL
2016 SEP -7 PM 12:15

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)
Approved: ✓ Disapproved: Date: 9-13-16 By: [Signature]
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 Heather Longo x7373 with questions or for contract packet pick-up. Thank you!

[Signature] 9/2/16 Date Deputy Director, Administration and Contracts 8/29/16 Date
CFO Review

CP 8/26/16
JA 8/31/16