

RESOLUTION ROUTING SHEET

Date Prepared: January 2, 2019

Need Date: RUSH – January 7, 2019

PROCESSING DEPARTMENT:

Department: HHSA

Dept. Contact: Jason

Phone: X7331

Department

Head Signature: *Donald Semon*
Donald Semon, Director

CONTRACTOR:

Name: N/A

Address: N/A

Phone: N/A

Org Code: 5000

Auditor/Controller Notified N/A – Under \$100k

CONTRACTING DEPARTMENT: HHSA Community Services Division

Service Requested: Review of Resolution in Support of Whole Person Care Pilot Program Funding

Contract Term: TBD – Fund Expenditure by 6/30/25 Contract Value: \$467,853

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

Approved: X Disapproved: _____ Date: 1/7/2020 By: *P. Brandy*

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

See Qs and comments.

Addressed in review of resolution and item. *SS*

HR APPROVAL: WILL BE REVIEWED THROUGH WORKFLOW

EDC COUNTY COUNSEL
2020 JAN 2 PM 1:21

RISK MANAGEMENT: WILL BE REVIEWED THROUGH WORKFLOW

PLEASE EMAIL HHSA CONTRACTS@EDCGOV.US FOR PICK-UP...THANKS!