

NEW AGREEMENT CONTRACT ROUTING SHEET

Date Prepared: 10/26/2018

Need Date: ASAP Please (BOS 12/04/18)

PROCESSING DEPARTMENT:

Department: Health & Human Services Agency
Dept. Contact: Darci Prall
Phone: 642-7373
Department
Head Signature: *Baterina Clark-Hend*

CONTRACTOR:

Name: Willow Glen Care Center, Inc.
Address: 1547 Plumas Court
Yuba City, CA 95993
Phone: 530-751-9903
Org Code: 5320

CONTRACTING DEPARTMENT: HHSA

Service Requested: Adult residential mental health facility
Contract Term: Upon Execution – 12/31/2024, Contract Value: \$2,500,000
5 years

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

Approved: X Disapproved: _____ Date: 11/2/18 By: *[Signature]*
Approved: _____ Disapproved: _____ Date: _____ By: _____

ELDORADO COUNTY COUNSEL
2018 OCT 31 PM 1:50

HR APPROVAL: WILL BE REVIEWED THROUGH WORKFLOW

RISK MANAGEMENT: WILL BE REVIEWED THROUGH WORKFLOW

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