

Contract #: Resolution XX-2018

Index Code: _____

CONTRACT ROUTING SHEET

Date Prepared: 04/26/18

Need Date: 05/15/18 (Board Agenda on 6/12)

PROCESSING DEPARTMENT:

Department: Health & Human Svcs Agency

Dept. Contact: Consie Mote

Phone #: X 7118

Department

Head Signature: Patricia Charles-Heathers
Patricia Charles-Heathers, Ph.D., M.P.A., Director

CONTRACTOR:

Name: HHSA EMS

Address: _____

Phone: _____

CONTRACTING DEPARTMENT: Health and Human Services Agency

Service Requested: 2018 Fee Resolution and Fee Schedule

Contract Term: Upon execution until new fees approved Contract/Grant Value: _____

Compliance with Human Resources requirements? N/A Yes _____ No: _____

Compliance verified by: N/A Resolution

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

Approved: Disapproved: _____ Date: 5/2/2018 By: K. Markham

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

See highlights & note

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

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

Approved: Disapproved: _____ Date: 5/3/2018 By: [Signature]

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

PM 3:20 HR/RM MAY 2 '18

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 Consie Mote, 7118 with questions or for contract packet pick-up. Thank you!

Yvonne Hollings 4/26/18
Chief Fiscal Officer Date

[Signature] 4/26/18
Deputy Director, Administration and Contracts Date

A/P or A/R Mgr Approval: _____
Initials/Date

Contracts ASO Approval: [Signature] 4/26/18
Initials/Date

For Tahoe Tribune

Account Number: 1064252

Notice of Public Hearing to be Published

Please publish the following Notice of Public Hearing two (2) times; once on May 25, 2018, and once on June 1, 2018:

NOTICE OF PUBLIC HEARING

NOTICE IS HEREBY GIVEN that the El Dorado County Board of Supervisors will hold a public hearing on Tuesday, June 12, 2018 at 11:00 a.m. in the Board of Supervisors Meeting Room, 330 Fair Lane, Building A, Placerville, California, to consider adopting one (1) Resolution to establish fees and rates for the Emergency Medical Services Agency. All interested persons may appear and be heard at that time. If you challenge the fee in court, you may be limited to raising only those issues you or someone else raised at the public hearing described in this notice, or in written correspondence delivered to the Board of **Directors** at, or prior to, the public hearing.

Supervisors?

Please send the cost and proof of ad to me via e-mail at constance.mote@edcgov.us prior to publishing the Notice. After the Notice has been published, please send the proof of publication to my attention either via e-mail or via U.S. Mail to the following address: 3057 Briw Road, Suite B, Placerville, CA 95667. The invoice to publish this Notice of Hearing is to be mailed as follows: County of El Dorado, EMS Agency, 2900 Fair Lane Court, Placerville, CA 95667.

Thank you for your assistance in this matter. If there are questions or concerns, please do contact me.