Agreement # 9019				
Legistar # 24-1608	_eg			

AGREEMENT CONTRACT ROUTING SHEET

Date Prepared:	11/14/2024	Need Date:	11/18/2024
PROCESSING DEPARTMENT:		CONTRACTOR:	
Department: Dept. Contact: Phone: Department Head Signature:	Health and Human Services Agency Kristy Fackrell	Name: Address: Phone:	Sierra Mental Wellness Group 406 Sunrise Avenue Suite 300
	x6919 Alisha Bryden Digitally signed by Alisha Bryden Date: 2024.11.07 15:07:46 -08'00'		Roseville, CA 95661 916-783-5207
	Alisha Bryden Administrative Analyst Supervisor	Org Code: Project # (if applicable	5310150 - BH Mental Health MHSA 6): 63MHSAPEI-53ACCLINK-CCMU-WS & 53MHSAPEI-53ACCLINK-CCMU-SLT
CONTRACTING	DEPARTMENT: HHSA	Funding Sou	Federal and State: 75% Mental Health Services Act (MHSA) and 25% Federal Medi-Cal
•	s Care Mobile Unit Services / If extended for 1 add	ditional year then Cont	
COUNTY COUNS Approved: Approved:	SEL: (Must approve all contracts ✓ Disapproved: Disapproved:	and MOU's) Date: 11/19/20 Date:	By: Nicole Wright Digitally signed by Nicole Wright Date: 2024.11.19 09-17-08 By:
with edits as noted.			
HR APPROVAL:	WILL BE REVIEWED THROUG	H WORKFLOW	l
RISK MANAGEN	MENT: WILL BE REVIEWED THE	ROUGH WORK	FLOW
PLEASE E	MAIL SIGNED DOCUMENT T Thank		