

CONTRACT ROUTING SHEET

Date Prepared: 12-14-10

Need Date: 1-7-11

PROCESSING DEPARTMENT:

Department: Human Services
Dept. Contact: Shirley I. C. Hodgson
Phone #: X7268
Department
Head Signature: *Daniel Wilson*

CONTRACTOR:

Name: D.N. Associates
Address: 2142 N. Blythe Avenue
Fresno, CA 93722
Phone: 559-261-5083

10 DEC 17 AM 9:35
CONTRACTOR DEPT

CONTRACTING DEPARTMENT: Human Services

Service Requested: Foster care/group home services on an "as requested" basis for DHS clients
Contract Term: 4-4-08 - perpetual Contract Value: \$250,000
Compliance with Human Resources requirements? Yes: 12-3-10 No: _____
Compliance verified by: Mike Stella

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

Approved: ✓ Disapproved: _____ Date: 12-16-10 By: *Ed/ham*
Approved: _____ Disapproved: _____ Date: _____ By: _____

EL DONALD COURTNEY
2010 DEC 15 AM 11:35

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: ✓ Disapproved: _____ Date: 12/17/10 By: *MS*
Approved: _____ Disapproved: _____ Date: _____ By: _____

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).

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