

NEW AGREEMENT CONTRACT ROUTING SHEET

Date Prepared: 23
8/17/18

Need Date: 8/27/18

PROCESSING DEPARTMENT:

Department: Health & Human Svcs Agency
Dept. Contact: Kathryn Deffebach
Phone: X7147
Department
Head Signature: *Peterson-Laura*

CONTRACTOR:

Name: Template for HomeBase Sponsorship
Address: _____
Phone: _____
Org Code: 5210

CONTRACTING DEPARTMENT: Health and Human Services Agency

Service Requested: Template for donors who wish to sponsor the HomeBase agreement

Contract Term: Two years upon execution Contract Value: \$-TBD (\$20k?)

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

Approved: _____ Disapproved: X Date: 8/27/18 By: *P. Brandy*
Approved: X Disapproved: _____ Date: 8/28 By: *P. Brandy*

Revise terms to be consistent w/ the HB 10/1/18

Resubmitted 8/29/18 (KD)

Resubmitted 9/5/18 - Risk recommendation (KD)

EL DORADO COUNTY COUNSEL
2018 AUG 27 AM 9:36

EL DORADO COUNTY COUNSEL
2018 AUG 28 PM 1:17

EL DORADO COUNTY COUNSEL
2018 SEP -5 AM 8:09

HR APPROVAL: WILL BE REVIEWED THROUGH WORKFLOW

RISK MANAGEMENT: Manually requested.

PLEASE CALL x7417 FOR PICK-UP...THANKS!