

CONTRACT ROUTING SHEET

Date Prepared: 6-10-10

Need Date: 6-30-10

PROCESSING DEPARTMENT:

Department: Human Services
Dept. Contact: Shirley I. C. Hodgson
Phone #: X72678
Department
Head Signature: *Shirley Hodgson*

CONTRACTOR:

Name: Karis House, Inc.
Address: 714 North Willis
Visalia, CA 93291
Phone: (559) 735-0712

CONTRACTING DEPARTMENT: Human Services

Service Requested: Foster care/group home services on an "as requested" basis
Contract Term: Perpetual Contract Value: \$100,000.00
Compliance with Human Resources requirements? Yes: 6-9-10 No: _____
Compliance verified by: Mike Strella

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

Approved: Disapproved: _____ Date: 6-24-10 By: *Carly*
Approved: _____ Disapproved: _____ Date: _____ By: _____

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: Disapproved: _____ Date: 6/28/10 By: *MSJ*
Approved: _____ Disapproved: _____ Date: _____ By: _____

Auto ins expires in July - Need renewals

Updated Auto ins rec'd. SK

Please call Shirley Hodgson at x7268 to pick up. Thanks.

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

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

RECEIVED
HUMAN RESOURCES DEPT
JUN 25 PM 4:10