

**NEW AGREEMENT
CONTRACT ROUTING SHEET**

Date Prepared: 9/10/18

Need Date: 9/24/18

PROCESSING DEPARTMENT:

CONTRACTOR:

Department: CAO for District Attorney

Name: The Center for Violence Free Relationships

Dept. Contact: Megan Arevalo *MA*

Address: 344 Placerville Dr, Ste 11

Phone: 5147

Address: Placerville, CA 95667

Department: _____

Phone: _____

Head Signature: *Sara Schwart*

Org Code: 2200000

CONTRACTING DEPARTMENT: District Attorney

Service Requested: Review professional services agreement for a Victim Advocate

Contract Term: 1 year Contract Value: \$73,200

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

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

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

HR APPROVAL: WILL BE REVIEWED THROUGH WORKFLOW

RISK MANAGEMENT: WILL BE REVIEWED THROUGH WORKFLOW

PLEASE CALL x5147 FOR PICK-UP...THANKS!