

AGREEMENT CONTRACT ROUTING SHEET

Date Prepared: 10/17/2023

Need Date: _____

PROCESSING DEPARTMENT:

CONTRACTOR:

Department: Health and Human Services Agency

Name: CASA El Dorado

Dept. Contact: Khrista Ringnes

Address: 347 Main Street

Phone: x7118

Placerville, CA 95667

Department Head Signature: Alisha Bryden
Digitally signed by Alisha Bryden
Date: 2023.10.18 16:56:17 -07'00'

Phone: 530-622-9882

Alisha Bryden
Administrative Analyst Supervisor

Org Code: 5130

Project #
(if applicable): _____

Funding Source: Cal OES VOCA XC23 Grant Funding

CONTRACTING DEPARTMENT: HHS- Protective Services

Service Requested: Please review attached contract

Description: Grant funded Court Appointed Special Advocates for Underserved Youth (\$161,022 total County to CASA; \$40,256 in-kind volunteer match required by CASA for fed. subaward)

Contract Term: 01/01/2024-12/31/2024

Contract Value: \$ 161,022.00

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

Approved:

Disapproved:

Date: 12/18/2023

By: Daniel Vandekoolwyk
Digitally signed by Daniel Vandekoolwyk
Date: 2023.12.18 08:08:25 -08'00'

Approved:

Disapproved:

Date: _____

By: _____

HR APPROVAL: WILL BE REVIEWED THROUGH WORKFLOW

RISK MANAGEMENT: WILL BE REVIEWED THROUGH WORKFLOW

PLEASE EMAIL SIGNED DOCUMENT TO: khrista.ringnes@edcgov.us

Thank you!