

NEW AGREEMENT CONTRACT ROUTING SHEET

RUSH!

Date Prepared: 9/5/19

Need Date: 9/12/19

PROCESSING DEPARTMENT:

Department: HHSA

Dept. Contact: Lisa Konyecsni

Phone: Ext. 6901

Department

Head Signature: *[Signature]*

Donald Semon, Director

CONTRACTOR:

Name: Sierra Child & Family

Address: 4250 Fowler Ln., Ste 204

Diamond Springs, CA 95619

Phone: _____

Org Code: 5310

Auditor/Controller Notified N/A – Under \$100k

CONTRACTING DEPARTMENT: HHSA – Behavioral Health Division

Service Requested: Student Outreach & Mental Health Support Services

Contract Term: Upon execution – 6/30/21 Contract Value: \$436,000

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

Approved: X Disapproved: _____ Date: 9/5/19 By: AVR

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

See notes in RED on pages 2, 4, 18, 22 and 24 of Agreement and page 1 of Exhibit A.

HR APPROVAL: WILL BE REVIEWED THROUGH WORKFLOW

RISK MANAGEMENT: WILL BE REVIEWED THROUGH WORKFLOW

RECEIVED
CO CO
SEP 05 2019
BY: KH@HUSA

PLEASE EMAIL HHSA CONTRACTS@EDCGOV.US FOR PICK-UP...THANKS!