

REVENUE, POLICY, ETC. ROUTING SHEET

Date Prepared: 01/26/2022

Need Date: 02/04/2022

PROCESSING DEPARTMENT:

Department: HHS
Dept. Contact: Alisha Johnson
Phone: (530) 642-7317
Department Head Signature: Nita Wracker
Digitally signed by Nita Wracker
MBA CPA
Date: 2022.01.26 14:45:39
-08'00'
MBA CPA
Nita Wracker, MBA, CPA
Agency Chief Fiscal Officer

CONTRACTOR:

Name: California Department of Social Services (CDSS)
Address: 744 P St, Sacramento, CA 95814
Phone: (800) 952-5253
Org Code: 5130
Project String
(if applicable): _____

CONTRACTING DEPARTMENT: HHS

Service Requested: Review attached Letter of Intent - RUSH Approval

Description: Letter of Intent requires County signature in order to accept Family First Transition Act (FFTA) Transition Grant funding

Contract Term: upon award TBD through through September 30, 2025 Contract Value: \$139,929

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

Approved: Disapproved: Date: 02/04/2022 By: Paula Frantz
Digitally signed by Paula Frantz
Date: 2022.02.03 16:51:56 -11'00'
Approved: Disapproved: Date: _____ By: _____

100% Title IV-E federal funding enacted under the Family First Prevention Services Act (FFPSA) through Public Law 115-123

HR APPROVAL:

Compliance with Human Resources requirements? Yes: No:
Compliance verified by: _____

RISK MANAGEMENT APPROVAL: (all contracts & MOU's except boilerplate grant funding contracts)

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

HR/ Risk Approval Not Needed.

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

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

