

Contract #: LIHEAP 12B-5807, A2
& Resolution

Index Code: 531113

CONTRACT ROUTING SHEET

Date Prepared: 12/11/12

Need Date: ~~12/26/12~~ 1/10/13 HW

PROCESSING DEPARTMENT:

Department: HHSA/CSD

Dept. Contact: Heather Longo

Phone #: X7373

Department: _____

Head Signature: *Daniel Nielson*
Daniel Nielson, M.P.A., Director

CONTRACTOR:

Name: CA Dept. Community Services & Development

Address: PO Box 1947
Sacramento, CA 95812-1947

Phone: _____

CONTRACTING DEPARTMENT: Health and Human Services Agency/Comm Services Division

Service Requested: LIHEAP program and services

Contract Term: Jan 1, 2012-June 30, 2013

Contract/Grant Value: \$1,135,461.00

Compliance with Human Resources requirements? Yes x No: _____

Compliance verified by: HR 12/30/11 with original contract

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

Approved: ✓ Disapproved: _____ Date: 1/3/13 By: *Josh Beck*
Approved: _____ Disapproved: _____ Date: _____ By: _____

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

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

Approved: ✓ Disapproved: _____ Date: 1/8/2013 By: *Adam M*
Approved: _____ Disapproved: _____ Date: _____ By: _____

Please contact Heather Longo X7373 for pick-up. TX.

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

NOTE: All contracts that involve the acquisition of software or computer related items must be approved by IT.

Departments: _____

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

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

HL 12/18/12
Contracts Review/date

Cynthia K. Gillin 12/26/12
Contracts Mgr Review/date