

Contract #: 441-F1711
Index Code: 531011

CONTRACT ROUTING SHEET

Date Prepared: 2/21/17

Need Date: 3/31/17

PROCESSING DEPARTMENT:

Department: HHSA/Comm Svcs Division
Dept. Contact: Kathryn Lang
Phone #: X7147
Department
Head Signature: Patricia Charles-Heathers

CONTRACTOR:

Name: Hangtown Haven, Inc
Address: PO Box 89
Placerville, CA 95667
Phone: _____

Patricia Charles-Heathers, Ph.D., Director

CONTRACTING DEPARTMENT: HHSA/Community Svcs Division

Service Requested: Funding for operation of winter shelters
Contract Term: 11/15/16 - 6/30/17 Contract/Grant Value: \$10,575
Compliance with Human Resources requirements? N/A x Yes _____ No: _____
Compliance verified by: _____

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

Approved: X Disapproved: _____ Date: 2/28/17 By: [Signature]
Approved: _____ Disapproved: _____ Date: _____ By: _____

Note: While this Funding Agmt ~~is~~ allows payment for activities conducted before its execution, this is NOT a reho svc contract. The City accepted state funding to be used for winter sheltering of homeless. To grant these funds is NOT, therefore, an imperm. gift of publ. funds, since the funds are being used for the publ. purpose for which they were given to the City.

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

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

Approved: ✓ Disapproved: _____ Date: 3-6-17 By: [Signature]
Approved: _____ Disapproved: _____ Date: _____ By: _____

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

NOTE: Any contract that involves the development, installation, implementation, storing, retrieving, transfer, or sending of electronic information, the acquisition of software or computer related items, or any other service/item that may be IT related, especially those that involve computers and telecommunications, must be approved by IT before submission to Counsel. This also applies to any other contract that requires approval from another department.

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

[Signature] 2/14/17
Chief Fiscal Officer Date

[Signature] 2/14/17
Deputy Director, Administration and Contracts Date