

CONTRACT ROUTING SHEET

Date Prepared: 11-21-08

Need Date: 12-21-08

PROCESSING DEPARTMENT:

Department: Human Services

Dept. Contact: Shirley I. C. Hodgson

Phone #: X7268

Department Head Signature: [Signature]

Head Signature: [Signature]

CONTRACTOR:

Name: New Morning Youth and Family Services, Inc.

Address: 6765 Green Valley Road
Placerville, CA 95667

Phone: 530 622 5551

CONTRACTING DEPARTMENT: Human Services

Service Requested: Therapeutic counseling services and parenting classes on an "as requested" basis.

Contract Term: 7-1-08 through 6-30-11 Contract Value: \$150,000.00

Compliance with Human Resources requirements? Yes: 4-15-08 No: []

Compliance verified by: Patti Barton + 12-9-08

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

Approved: [] Disapproved: [] Date: 11-25-08 By: [Signature]

Approved: [] Disapproved: [] Date: [] By: []

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: [] Disapproved: [] Date: 11/25/08 By: [Signature]

Approved: [] Disapproved: [] Date: [] By: []

Please call Shirley Hodgson at x7268 to pick up. Thanks.

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

Departments: []

Approved: [] Disapproved: [] Date: [] By: []

Approved: [] Disapproved: [] Date: [] By: []

EL DORADO COUNTY COUNSEL
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Reid Nov. 25, 2008

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