REVIEW AND APPROVAL REQUESTED FOR:

☑ Contract ☐ Amendment ☐ Resolution ☐ Ordinance ☐ Policy ☐ Other

County Counsel
REVIEW ROUTING SHEET

Date Prepared: 6/27/25 Need Date: 7/11/25

PROCESSING DEPARTMENT

Department: HHSA
Dept Contact: Kristy Fackrell
Phone: x6919
Dept. Signature: Alisha Bryden Digitally signed by Alisha Bryden Date: 2025.05.14 13:20:54 -07'00'
Title: Admin Analyst Supervisor

Org Code: 5320200
Funding Source: Opioid Settlement Funds
PL String: 53OPIOID25-53BANKRUPT-MALINKR
Legistar #: 25-0897

CONTRACT INFORMATION

CONTRACT #: 9595 CONTRACT AMENDMENT #: _____

Contracting Department: HHSA- Behavior Health- Substance Use Disorder
Contractor/Vendor Name: Muir Wood. LLC
Contract Term: 11/1/25-10/31/28 Contract Value: $375,000

Note - HR & RISK review will take place during Fenix Contract workflow - amendments see below.

ORDINANCE/RESOLUTION/POLICY INFORMATION

TITLE / SUBJECT: _____
NUMBER (If Assigned): _____

DESCRIPTION AND ADDITIONAL NOTES FOR COUNTY COUNSEL

Substance Use Disorder Residential Treatment services

COUNTY COUNSEL

Approved ☑ Disapproved ☐ Date: 7/24/25 By: Nicole C. Wright Digitally signed by Nicole C. Wright Date: 2025.07.24 12:10:49 -07'00'
Approved ☑ Disapproved ☐ Date: 9/18/25 By: Nicole C. Wright Digitally signed by Nicole C. Wright Date: 2025.09.18 09:24:57 -07'00'

COMMENTS _____

CONTRACT AMENDMENT ONLY

HR APPROVAL

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

RISK APPROVAL

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

COMMENTS _____