

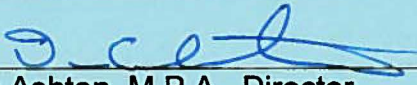
Contract #: 016-S1511
Index Code: 404131, 404132

CONTRACT ROUTING SHEET

Date Prepared: 4/7/14

Need Date: _____

PROCESSING DEPARTMENT:

Department: HHS/Public Health
Dept. Contact: Sharon Keoppel
Phone #: 4811
Department
Head Signature: 
Don Ashton, M.P.A., Director

CONTRACTOR:

Name: Wellspace (formerly The Effort)
Address: 1820 J Street
Sacramento, CA 95811
Phone: _____

CONTRACTING DEPARTMENT: Health and Human Services Agency

Service Requested: Residential and transitional living alcohol/drug treatment
Contract Term: 11/1/13- 10/31/16 Contract/Grant Value: \$100,000
Compliance with Human Resources requirements? N/A Yes X No:
Compliance verified by: Human Resources, 2/19/14, Feasibility Analysis attached

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

Approved: X Disapproved: _____ Date: 4/17/14 By: 
Approved: _____ Disapproved: _____ Date: _____ By: _____

EL DORADO COUNTY COUNSEL
2014 APR 17 AM 11:57

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

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

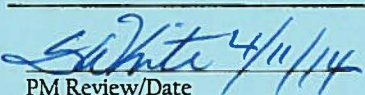
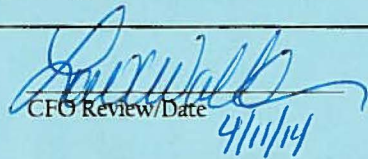

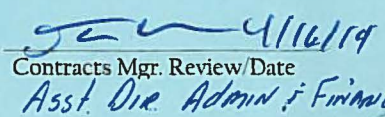
Approved: ✓ Disapproved: _____ Date: 4/22/14 By: 
Approved: _____ Disapproved: _____ Date: _____ By: _____

RECEIVED
HUMAN RESOURCES DEPT.
11 APR 21 PM 2:51

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 first approved by IT. Any contract that requires approval from another department must also be first approved by the other department.

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

 4/11/14 PM Review/Date
 4/11/14 CFG Review/Date
 4/8/14 Contracts Super. Review/Date
 4/16/14 Contracts Mgr. Review/Date
Asst. Dir. Admin. & Finance