

Contract #: 179-S1611 A1
Index Code: 418720

CONTRACT ROUTING SHEET

Date Prepared: 2/25/16

Need Date: ASAP

PROCESSING DEPARTMENT:

Department: HHSA/Mental Health

Dept. Contact: Laura K. Walny

Phone #: Ext. 7118

Department

Head Signature: 
Don Ashton, M.P.A., Director

CONTRACTOR:

Name: Summitview Child and Family Services, Inc.

Address: 670 Placerville Dr Suite 2
Placerville, CA 95667

Phone:

CONTRACTING DEPARTMENT: HHSA/Mental Health Division

Service Requested: Specialty Mental Health for minors (add \$117K for term + 1 slot)

Contract Term: Upon execution - 6/30/2018 Contract/Grant Value: \$612L + 117K = \$729,000

Compliance with Human Resources requirements? N/A Yes No

Compliance verified by: ** in process **

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

Approved: Disapproved: Date: 2/26/16 By: 

Approved: Disapproved: Date: By:

EL DORADO COUNTY COUNSEL
RECEIVED
25 FEB 2016 2:14 PM

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

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

Approved: Disapproved: Date: 3/1/16 By: 

Approved: Disapproved: Date: By:

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

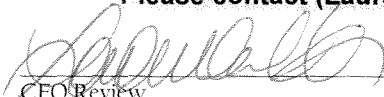
NOTE: Any contract that involves the development, installation, implementation, storing, retrieving, transfer, or sending of electronic information, the acquisition of software or computer related items, or any other service/item that may be IT related, especially those that involve computers and telecommunications, 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:

Please contact (Laura K. Walny x7118) with questions or for contract packet pick-up. Thank you!

 2/25/16
CFO Review Date

 2/25/16
Deputy Director-Admin Date