

CONTRACT ROUTING SHEET

Date Prepared: 2-1-11

Need Date: 2-16-11

PROCESSING DEPARTMENT:

Department: Human Services
Dept. Contact: Shirley I. C. Hodgson

CONTRACTOR:

Name: NP Quest Foundation, Inc.
Address: 2507 Starling Lane, West Sacramento, CA 95691 (Mail: 2201 Francisco Drive, #510-286 El Dorado Hills, CA 95762)
Phone: 916 642 3456

Phone #: X7268
Department
Head Signature: *Samuel Wilson*

CONTRACTING DEPARTMENT: Human Services

Service Requested: Foster care/group home services on an "as requested" basis
Contract Term: Dt of execution until terminated Contract Value: \$100,000.00
Compliance with Human Resources requirements? Yes: 1-21-11 No: _____
Compliance verified by: Mike Strella

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

Approved: Disapproved: _____ Date: 2-3-11 By: *Calhoun*
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: 2/4/11 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: _____