CONTRACT ROUTING SHEET

Date Prepared: 3/17/20 04-02-2020 Need Date: 3/31/2020 04-15-6	2020
PROCESSING DEPARTMENT: CONTRACTOR:	
Department: Health & Human Svcs Name: The Unity Care Group	
Dept. Contact: Consie Mote Address: 1400 Parkmoor Ave, #115	
Phone: X 7118 San Jose, CA 95126	
Department Signature: Phone: 408-971-9822	
Yvonne Kollings, CFO Org Code: 5130	
CONTRACTING DEPARTMENT: Health and Human Services Agency	
Service Requested: Independent Living Program for Foster Youth	
Contract Term: 9/21/17-9/30/2023 Contract Value: \$1,094,624 (adding \$569,	624)
Contract Type: Expenditure Agreement or Amendment	arri
□ Non-Financial Agreement or Amendment EDC COUNTY COU	40EL :50
☐ Revenue Agreement or Amendment 2020 HFR 2 Find	
COUNTY COUNSEL: (Must approve all contracts and MOU's)	
Approved: Disapproved: Date: Date: By: By: Date: By: Date: By: Date: By: Date: By: Date: By: Date: By: By: Date: By: Date: By: Date: By: Date: By: Date: By: Date: By: By: Date: By: Date: By: Date: By: Date: By: Date: By: Date: By: By: Date: By: Date: By: Date: By: Date: By: Date: By: Date: By: By: Date: By: Date: By: Date: By: Date: By: Date: By: Date: By: By: Date: By: Date: By: Date: By: Date: By: Date: By: Date: By: By: Date: By: Date: By: Date: By: Date: By: Date: By: Date: By: By: Date: By: Date: By: Date: By: Date: By: Date: By: Date: By: By: Date: By: Date: By: Date: By: Date: By: By: Date: By: Date: B	
Approved: Disapproved: Date: By:	
HR APPROVAL:	
Approval will occur in FENIX ————————————————————————————————————	
Approval will occur outside FENIX Please route to Human Resources	
Compliance with Human Resources requirements? Compliance verified by: No:	
(1,5/1/07)	
RISK MANAGEMENT:	
Approval will occur in FENIX ————————————————————————————————————	
Approved: Disapproved: Date: Date:	1
OTHER APPROVAL: N/A {}	
Approved: Disapproved: Date: By:	
Approved: Disapproved: Date: By:	
Approved: Disapproved: Date: By:	