

# SHEET

Date Prepared: 5/21/07

Need Date: 5/25/07 PLEASE RUSH

### PROCESSING DEPARTMENT:

Department: Human Services

Dept. Contact: Jasara Bento

Phone #: 7312

Department Head Signature: *John Litwinovich*

John Litwinovich, Director

### CONTRACTOR:

Name: California Dept. of Community Services & Development

Address: 700 North 10<sup>th</sup> St., Room 258 Sacramento, CA 95814-0338

Phone: 916-341-4275

### CONTRACTING DEPARTMENT: Human Services, Community Services Division

Service Requested: Amendment to State Grant Contract for provision of 2007 LIHEAP Services

Contract Term: 1/1/07 - 12/31/07 Contract Value: \$562,046.00

Compliance with Human Resources requirements? Yes: x No:         

Compliance verified by: Patti Barton with original contract

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

Approved: ✓ Disapproved:          Date: 5-23-07 By: *[Signature]*

Approved:          Disapproved:          Date:          By:         

ASSIGNMENT

DATE: 05/22/07  
ATTORNEY: Ed Knap  
DEPT./INDEX NO.: 53100  
[Signature]

2007 MAY 23 PM 5:01  
DORADO COUNTY COUNSEL  
*[Signature]*

PLEASE EXPEDITE AND CALL JASARA AT #7312 WHEN READY TO PICKUP. THANKS!

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

Approved: ✓ Disapproved:          Date: 5-24-07 By: *[Signature]*

Approved:          Disapproved:          Date:          By:         

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

Departments: n/a

Approved:          Disapproved:          Date:          By:         

Approved:          Disapproved:          Date:          By: