

Contract #: 086-S1511 A1
Index Code: 418920,418940,418930

CONTRACT ROUTING SHEET

Date Prepared: 4/16/15 TO Counsel 4/29/15
#W

Need Date: 5/5/15 HW

PROCESSING DEPARTMENT:

Department: HHSA/MHD
Dept. Contact: Heather Longo

Phone #: X7373

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

CONTRACTOR:

Name: Progress House, Inc.
Address: 2844 Coloma St, Placerville, CA 95667

(Mailing: PO Box 1666, Placerville, CA 95667)

Phone: 530/626-9240

CONTRACTING DEPARTMENT: HHSA/Mental Health Division

Service Requested: Drug and Alcohol Program Services \$2,501,000.00 HW

Contract Term: 9/30/14-6/30/17 Contract/Grant Value: \$2,445,000.00-

Compliance with Human Resources requirements? N/A Yes x No:

Compliance verified by: Judie Engel 4/8/15

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

Approved: x Disapproved: Date: 4/30/15 By: 

Approved: Disapproved: Date: By:

COUNTY COUNSEL

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

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

Approved: X Disapproved: Date: 5/1/15 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 Heather Longo x7373 with questions or for contract packet pick-up. Thank you!


CFO Review Date: 4/28/15


Program Manager II, Administration and Contracts Date: 4/23/15

4/20/15