

CONTRACT ROUTING SHEET

Date Prepared: 12-28-11

Need Date: 1-17-12

PROCESSING DEPARTMENT:

Department: Health & Human Svc Agency

Dept. Contact: Shirley I. C. Hodgson

Phone #: X7268

Department

Head Signature: *Janet Nalley Conroy*
12/29/11

CONTRACTOR:

Name: James N. Hardwick dba New Leaf Counseling Services

Address: 1254 High St., Auburn, Ca 95603 (Mail: 4673 Thornton Ave, #A, Fremont, Ca 94536)

Phone: 510-791-8006

12-28-11
HUMAN RESOURCES DEPT.

CONTRACTING DEPARTMENT: Health & Human Services Agency, Social Services Division

Service Requested: Therapeutic counseling, substance abuse treatment services and drug testing for women and women with children

Contract Term: 2-28-12 to 2-27-15 Contract Value: \$100,000.00

Compliance with Human Resources requirements? Yes: 12-1-11 No: _____

Compliance verified by: Mike Strella

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

Approved: Disapproved: _____ Date: 1-3-12 By: *[Signature]*

Approved: _____ Disapproved: _____ Date: _____ By: _____

EL DONALDO COUNTY COUNSEL
2011 DEC 30 AM 11:58

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: Disapproved: _____ Date: 1/4/12 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: _____