

Resubmitted: 12/15/17

Contract #: 221-M1810 FENIX #425
Index Code: 5310

CONTRACT ROUTING SHEET

Date Prepared: 11/30/17

Need Date: 12/14/17

PROCESSING DEPARTMENT:

Department: Health & Human Svcs Agency
Dept. Contact: Kathryn Lang
Phone #: X 7147
Department
Head Signature: *[Signature]* 11/30/17

CONTRACTOR:

Name: EDCOE
Address: 6767 Green Valley Road
Placerville, CA 95667
Phone:

Patricia Charles-Heathers, Ph.D., Director
for Patricia Charles-Heathers

CONTRACTING DEPARTMENT: Health and Human Services Agency

Service Requested: Provision of educational case mgmt for foster placement children.

Contract Term: upon execution - 3 yrs Contract/Grant Value: \$ 150,000.00

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

Compliance verified by: 9/13/17 Approved by HR

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

Approved: Disapproved: Date: 12/4/17 By: *[Signature]*
Approved: Disapproved: Date: 12/15/17 By: *[Signature]*

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

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

Approved: Disapproved: Date: 12-6-17 By: *[Signature]*
Approved: Disapproved: Date: By:

*Pending Clarification Language in Article XV
Done 12/15/17 - K. Lang*

PM3:37 HR/RM DEC 5 17

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: N/A

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

Please contact Kathryn Lang x7147 with questions or for contract packet pick-up. Thank you!

[Signature] 11/29/17
Chief Fiscal Officer Date

[Signature] 11/16/17
Deputy Director, Administration and Contracts Date

A/P or A/R Mgr Approval: *[Signature]* 11/29/17
Initials/Date

Contracts ASO Approval: *[Signature]* 11/14/17
Initials/Date