Contract #: 131-S1311, A3

Index Code:

418720

CONTRACT ROUTING SHEET

Date Prepared:	4/28/14	Need Dat	e: 5/22	/14		
PROCESSING DEPARTMENT: Department: HHSA- Mental Health		CONTRACTOR: Name: Summitview Child & Family Svcs, Inc.				
Dept. Contact:	Sharon Keoppel			ant Valley R		
Phone #:	x 4811	/taarooo.			ings, CA 95619	
Department	7 1011	Phone:	530-621-9			
Head Signature:	9.00					
	Don Ashton, M.P.A., Director					
			N	-4-11114-1	District	
CONTRACTING DEPARTMENT: Health and Human Services Agency, Mental Health Division						
Service Requested: Specialty MH services for minors Contract Term: 7/1/12 through 6/30/15 Contract/Grant Value: \$1,760,000						
	Human Resources requirements?	N/A	_ Yes	x No)	
Compliance verified by: Human Resources						
COUNTY COUNS	SEL: (Must approve all contracts	and MOU's)		04		
Approved: X		Date: 55	14	By. 3000	ny	
Approved:	Disapproved:	Date:		By:		
					_ 8	
					+ 5	
					2 110	
					1 (0.09	
					8.5	
					<u> </u>	
PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU! RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)						
	Disapproved:	Date: 5/7	te grant iun - Liu		As	
Approved:	Disapproved:	Date:	117	By: Jue	<u> </u>	
Approved.	Disapproved.	Date.		Бу	2 =	
					0 0	
A					A A	
ATT THE PARTY OF					. 0	
					6 8	
		CONTRACTOR OF THE		Ĭ,	P T	
OTHER APPROV	AL: (Specify department(s) parti	cipating or dire	ctly affected	d by this cor	rtrast).	
	s that involve the acquisition of software					
	quires approval from another departme	nt must also be t	irst approved	by the other	department.	
Departments:					<u> </u>	
Approved:	Disapproved:	Date:		By:		
Approved:	Disapproved:	Date:		By:	11 11 11 11 11 11 11	
		1	1 -1			
01 01 110	Henro for	. Sorvel	1/1/	9	-	
PM Review/Date	Contracts Supe Review/Date	CFO Review/Date	UNDINI	Asst Dir of Adr	nin & Finance	
			462111			

Rev. 12/2000 (GS-GVP)

12-1108 4A 1 of 1