	CONTRACT R	OUTING S	Contract #:RESOLUTION
Date Prepared: 5/22/17		Need Date: 5/30/17	
Dept. Contact: CJ	ARTMENT: PB/LRP, HCED Program I Freeland tt, 5159	Address:	CTOR: CoreCare Foundation, Inc. P.O. Box 2708 Orangevale CA 95662 916-949-8882
Service Requested: Contract Term: N/A	Review and Approve nan Resources requirement	Contract Value	_ong Range Planning, HCED : N/ANo:
COUNTY COUNSEL Approved: Approved:	: (Must approve all contrac Disapproved: Disapproved:	ts and MOU's) Date:/a Date:	26/17By: <u>K. Markham</u>
			L DORADO COUNTY COUNSEL 2017 MAY 25 AM 8: 07
RISK MANAGEMEN Approved: Approved:	T: (All contracts and MOU's Disapproved: Disapproved:	s except boilerpla Date: _ Date:	te grant funding agreements) By: By:
OTHER APPROVAL: Departments: Approved: Approved:	: (Specify department(s) pa Disapproved: Disapproved:	rticipating or direction of the second secon	ctly affected by this contract).