

AMENDMENTS CONTRACT ROUTING SHEET

Date Prepared: 3/19/19

Need Date: 3/21/19

PROCESSING DEPARTMENT:

Department: Health & Human Svcs
Dept. Contact: Lisa Konyecsni
Phone: 6901
Department Head Signature: [Signature]
Don Semon, Director

CONTRACTOR:

Name: New Morning Youth & Family Svcs
Address: 6767 Green Valley Rd. Placerville, CA 95667
Phone: _____
Org Code: 5310

Auditor/Controller Notified

CONTRACTING DEPARTMENT: HHSA – Behavioral Health Division

Service Requested: MHSA – Parenting Skills Project

Contract Term: 7/1/11 - 6/30/20 Contract Value: \$150,000

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

Approved: Disapproved: _____ Date: 3/19/19 By: [Signature]
Approved: _____ Disapproved: _____ Date: _____ By: _____

EL DORADO COUNTY COUNSEL
2019 MAR 19 AM 11:05

HR APPROVAL:

Compliance with Human Resources requirements? [Signature] 3/22/19 Yes No: _____
Compliance verified by: _____

RISK MANAGEMENT: (all contracts & MOU's except boilerplate grant funding contracts)

Approved: Disapproved: _____ Date: 3/21/19 By: [Signature]
Approved: _____ Disapproved: _____ Date: _____ By: _____

FWA-17 HR/RM MAR 20 '19

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract)

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

PLEASE EMAIL HHSA CONTRACTS@EDCGOV.US FOR PICK-UP...THANKS!