

NEW AGREEMENT CONTRACT ROUTING SHEET

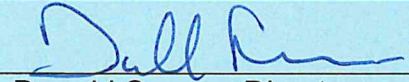
To Counsel:

Date Prepared: 2/19/2020
2/11/2020

Need Date: 3/15/20

PROCESSING DEPARTMENT:

Department: HHSA
Dept. Contact: Consie Mote
Phone: 7118

Department
Head Signature: 
Donald Semon, Director

CONTRACTOR:

Name: Industrial Employers and
Distributors Association
Address: 2200 Powell Street, Suite 1000
Emeryville, CA 94608

Phone: _____

Org Code: 5270



Auditor/Controller Notified N/A – Under \$100k

CONTRACTING DEPARTMENT: Health and Human Services Agency (HHSA)-
In Home Support Services Public Authority (IHSS)

Service Requested: Labor relations consultant for IHSS Public Authority

Contract Term: 7/1/2020-6/30/2021 Contract Value: \$23,000

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

Approved: X Disapproved: _____ Date: 2/20/20 By: 
Approved: _____ Disapproved: _____ Date: _____ By: 

EDC COUNTY COUNSEL
2020 FEB 20 09:11:11

HR APPROVAL: WILL BE REVIEWED THROUGH WORKFLOW

RISK MANAGEMENT: WILL BE REVIEWED THROUGH WORKFLOW

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