

Agreement # _____

Legistar # 20-1161

AGREEMENT CONTRACT ROUTING SHEET

Date Prepared: 08/27/2020

Need Date: 09/03/2020

PROCESSING DEPARTMENT:

Department: HHSA
Dept. Contact: Jason Stalder
Phone: x7331
Department
Head Signature: _____

CONTRACTOR:

Name: Cal.OES
Address: 3650 Schriever Ave
Mather, CA 95655
Phone: 916-845-8878
Org Code: HHSA Dept 50
Project #
(if applicable): _____

Funding Source: Federal - VOCA Funds

CONTRACTING DEPARTMENT: HHSA

Service Requested: Review of Certification of Assurance of Compliance and Grant Face Sheet for Elder Abuse Grant Program

Description: A new grant cycle for Elder Abuse Program funds requires a new Certification of Assurance of Compliance as a part of application

Contract Term: January 1, 2021 - December 31, 2021 Contract Value: \$ 206,000.00

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

Approved: Disapproved: Date: 08/31/2020 By: Paula Frantz
Approved: Disapproved: Date: _____ By: _____

Digitally signed by Paula Frantz
DN: cn=Paula Frantz, o=EdCgov, ou=EdCgov, email=Paula.Frantz@edcgov

HR APPROVAL: WILL BE REVIEWED THROUGH WORKFLOW

RISK MANAGEMENT: WILL BE REVIEWED THROUGH WORKFLOW

PLEASE EMAIL FOR PICK-UP cao-contracts-newrequests@edcgov.us Thank you!

8/28/2020

Edcgov.us Mail - Please Review - CRS for new Elder Abuse Grant



Jason Stalder <jason.stalder@edcgov.us>

Please Review - CRS for new Elder Abuse Grant

Yvonne Kollings <yvonne.kollings@edcgov.us>
To: Jason Stalder <jason.stalder@edcgov.us>
Cc: Kathryn Deffebach <kathryn.deffebach@edcgov.us>

Fri, Aug 28, 2020 at 10:38 AM

Please accept my electronic approval of this CRS for the Elder Abuse Grant.

Kind Regards,

Yvonne

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Yvonne Kollings
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El Dorado County
Health and Human Services Agency
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Placerville, CA 95667
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