Agreement # 5535	
Legistar # N/A	

AGREEMENT CONTRACT ROUTING SHEET

Date Prepared:	03/02/2021		Need Date:	Need Date: 03/12/2021		
PROCESSING DEPARTMENT:			CONTRACTOR:			
Department: Dept. Contact: Phone: Department Head Signature:	Health and Human Services Agency		Name:	CASA El Dorado		
	Consie Mote		Address:	347 Main Street		
	642-7118		_	Placerville, CA 95667		
	Nita Wracker MBA CPA	Digitally signed by Nita Wracker MBA CPA Date: 2021.03.03 16:34:44 -08'00'	Phone:	530-622-988	32	
	Nita Wracker, MBA CPA Agency CFO		Org Code:	5130		
			Project #			
			(if applicable): 51GRNTCASA-51GRTCASA -50400 -W			
			Funding Sou	urce: Cal (DES VOCA18 & VOCA19 funding	
CONTRACTING	DEPARTMEN	T: Health and Human	Services Agency			
Service Requeste	ed: Review of Con	tract				
Description: Gran	t funded Court appoir	nted special advocates for	r underserved youth			
Contract Term:	pon exec- 12/31/202	1	Contract Value	\$ 168,94	6.00	
COUNTY COUN: Approved: Approved:	<u>✔</u> Disap	oprove all contrac proved: proved:	ts and MOU's) Date: 03/08/20 Date:	021	By: Paula Frantz Digitally signed by Paula Frantz Date: 2021:03.08 16.49.29 By:	

HR APPROVAL: WILL BE REVIEWED THROUGH WORKFLOW

RISK MANAGEMENT: WILL BE REVIEWED THROUGH WORKFLOW

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