



Contract Number

SAP Number

Children and Family Services

Department Contract Representative	<u>Kris Bussard</u>
Telephone Number	<u>(909) 386-8395</u>
Contractor	<u>CA Department of Child Support</u>
Contractor Representative	<u>Kyla Kurylio</u>
Telephone Number	<u>(916) 464-6550</u>
Contract Term	<u>Effective upon execution by DCSS for 36 months</u>
Original Contract Amount	<u>N/A</u>
Amendment Amount	<u> </u>
Total Contract Amount	<u>N/A</u>
Cost Center	<u> </u>

Non-financial Memorandum of Understanding between California Department of Child Support (DCSS) and San Bernardino County Children and Family Services (CFS), outlining the responsibilities of each party in accessing and protecting confidential data for the administration of welfare and foster care programs, effective upon execution by DCSS for a period of 36 months thereafter.

FOR COUNTY USE ONLY

Approved as to Legal Form ▶ _____ Kaleigh Ragon, Deputy County Counsel Date _____	Reviewed for Contract Compliance ▶ _____ Patty Steven, Contracts Manager Date _____	Reviewed/Approved by Department ▶ _____ Jeany Zepeda, Director Date _____
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