



Contract Number

SAP Number

Department of Public Health

Department Contract Representative	<u>Dominic Correra</u>
Telephone Number	<u>(909) 665-2647</u>
Contractor	<u>Special Education Local Plan Areas</u>
Contractor Representative	<u></u>
Telephone Number	<u></u>
Contract Term	<u>Effective as of August 19, 2025,</u> <u>until amended or canceled.</u>
Original Contract Amount	<u>Non-financial</u>
Amendment Amount	<u>N/A</u>
Total Contract Amount	<u>Non-financial</u>
Cost Center	<u>N/A</u>
Grant Number (if applicable)	<u>N/A</u>

Briefly describe the general nature of the contract: Non-financial Interagency Agreement with Special Education Local Plan Areas to facilitate the provision of medically and educationally necessary occupational and physical therapy services.

FOR COUNTY USE ONLY

Approved as to Legal Form



Daniel Pasek, Deputy County Counsel

Date _____

Reviewed for Contract Compliance



Date _____

Reviewed/Approved by Department



Date _____