

Contract Number	
SAP Number	

## **Department of Public Health**

**Department Contract Representative** Tarah Cendejas 909-832-0807 **Telephone Number** Contractor California Department of Health Care Services Leta Brown **Contractor Representative Telephone Number** 916-449-5000 **Contract Term** July 1, 2025 through June 30, 2026 **Original Contract Amount** \$6,540,882 **Amendment Amount** N/A **Total Contract Amount** \$6,540,882 **Cost Center** 9300321000 **Grant Number (if applicable)** 800223

## **Briefly describe the general nature of the contract:**

Allocation from the California Department of Health Care Services for Health Care Program for Children in Foster Care funding, in the amount of \$6,540,882, for the period of July 1, 2025 through June 30, 2026.

FOR COUNTY USE ONLY			
Approved as to Legal Form	Reviewed for Contract Compliance	Reviewed/Approved by Department	
<b>&gt;</b>	<b>&gt;</b>	<b>&gt;</b>	
Daniel Pasek, Deputy County Counsel		Joshua Dugas, Director	
Date	Date	Date	