SHELBY COUNTY BOARD OF COMMISSIONERS
AGENDA ROUTE SHEET

Referred to Commission Committee (name) **LAW ENFORCEMENT, FIRE, CORRECTIONS & COURTS**

For Commission Action on (date): 7/21/08

RESOLUTION TO APPROVE A CONTRACT WITH ALCOHOL AND CHEMICAL ABUSE REHAB CENTER, INC. FOR THE PROVISION OF DRUG AND ALCOHOL TREATMENT SERVICES TO SHELBY COUNTY DRUG COURT OUTPATIENT PROGRAM IN AN AMOUNT NOT TO EXCEED $400,000.00. SPONSORED BY SYDNEY CHISM.

CHECK ALL THAT APPLY BELOW:

_____ This Action does NOT require expenditure of funds.

__x____ This Item requires/approves expenditure of funds as follows (complete all that apply):

County General Funds: $_____: County CIP Funds: $_____

State Grant Funds: $_____: State Gas Tax Funds: $_____

Federal Grant Funds: $_____

Other pass-thru funds (Specify source and amount): $$400,000.00.

Originating Department: **SHELBY COUNTY DRUG COURT**_____

APPROVAL:

Dept. Head: Roger Henderson (901) 545-2823 \ [illegible] \ 8-6-08
(Type your name & phone #.) (Initials) (Date)

Elected Official: Judge Tim Dwyer (901) 545-5192 \ TD \ 8-6-08
(Type your name & phone #.) (Initials) (Date)

Division Director: _____ \ _____ \ _____
(Type your name & phone #.) (Initials) (Date)

CIP – A&F Director: _____ \ _____ \ _____
(Type your name & phone #.) (Initials) (Date)

Finance Dept: [illegible] 8-6-08 _____ \ _____ \ _____
(Type your name & phone #.) (Initials) (Date)

County Attorney: Marli L. Bright \ [illegible] \ 8/6/08
(Type your name & phone #.) (Initials) (Date)

James F. Huntzicker 545-4514

CAO/Mayor: _____ \ [illegible] \ 8/6/08
(Type your name & phone #.) (Initials) (Date)