



Contract Number: CTN-HD-12 * 073-04
 Effective Date: 2-2-14
 Term Date: 2-1-15
 Cost: _____
 Revenue: _____
 Total: _____ NTE: _____
 Action: _____
 Renewal By: _____
 Term: 11-1-14
 Reviewed by: JR 2-1-15

BOARD OF SUPERVISORS AGENDA ITEM SUMMARY

Requested Board Meeting Date: Next Available

ITEM SUMMARY, JUSTIFICATION &/or SPECIAL CONSIDERATIONS:

The Pima County Health Department is contracting with Tucson Unified School District in a joint effort to provide dental screening, referral and sealant placement services to children at no charge.

Amendment 4 extends the contract through 02/01/2015.

CONTRACT NUMBER (If applicable): CTN 1200000000000000073 (formally 01-01-T-142688-0210), Amendment 4

STAFF RECOMMENDATION(S): Approval

Procure Dept 07/07/14 PM 12:01

CORPORATE HEADQUARTERS: 102 N. Plumer, Tucson, AZ 85719

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Ver.-4
Vendor.-1
PJ.-1

To: CoB - 7-23-14
Agenda 8-5-14
(3)

CLERK OF BOARD USE ONLY: BOS MTG. _____

ITEM NO. _____

PIMA COUNTY COST: 0 and/or REVENUE TO PIMA COUNTY: \$ 0

FUNDING SOURCE(S): N/A

(i.e. General Fund, State Grant Fund, Federal Fund, Stadium D. Fund, etc.)

Advertised Public Hearing:

| | | | | |
|--|--|-----|---|----|
| | | YES | X | NO |
|--|--|-----|---|----|

Board of Supervisors District:

| | | | | | | | | | | | |
|---|--|---|--|---|--|---|--|---|--|-----|---|
| 1 | | 2 | | 3 | | 4 | | 5 | | All | X |
|---|--|---|--|---|--|---|--|---|--|-----|---|

IMPACT:

IF APPROVED: Children will receive dental screening, referral and sealant placement services at no charge.

IF DENIED: Children may not receive dental screening, referral and sealant placement services.

DEPARTMENT NAME: Health Department

CONTACT PERSON: Ana Basurto/Denise Sauer TELEPHONE NO.: 243-7838/7947

