

**COUNTY OF LOS ANGELES – DEPARTMENT OF PUBLIC HEALTH
SUBSTANCE ABUSE PREVENTION AND CONTROL BUREAU
CHILD-FRIENDLY ENVIRONMENT FUNDS PROJECT APPROVAL FORM
ATTACHMENT I**

Agency Name	DMC Contract Number
Facility Address (DMC Certified Location)	
Child-Friendly Environment Funds Plan (Include an itemized list of activities and purchases with estimated costs.)	
Total Estimated Cost	Estimated Completion Date
Project Manager Name	Contact Information (Email and Phone)

Organizational Leadership Signature	
I confirm the Child-Friendly Environment Funds will be used at the site listed and as described above, and in accordance with SAPC Information Notice 25-14.	
Signature	Date

--SAPC USE ONLY--

Reviewed and Approved		
Division	Signature	Date
Systems of Care Division		
Finance Services Division		