

**COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
CONTRACTS DEVELOPMENT AND ADMINISTRATION DIVISION**

ATTACHMENT II

Date:

TO: Antonio Gando
Fiscal Audit Monitoring Section

FROM: _____
Contract Administrator
Richard Kushi, Chief

SUBJECT: **REQUEST FOR FINANCIAL VIABILITY REVIEW**

We are forwarding a copy of the independent CPA Financial Report for the entities listed below. Your review of this request will provide contract staff with the financial viability status of each entity. Please inform us of your findings, in writing. The Report and your response will become a permanent part of the entity's contract file.

Contract No.	Legal Entity Yes/No	Entity No.	Name of Entity	Check One Box To Indicate Contract Year (See Legend Below)			
				0	1	2	3/0
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Legend:

0 = Existing entity on its contract negotiation year
1 = 1st year of contract term

2 = 2nd year of contract term
3/0 = 3rd year of contract term and 0, if pursuing contract renewal option

Attachment(s)