rigiocinoni ii	Agreement # 6722	- Amendment # 4	Legistar # 24-0651
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CONTRACT AMENDMENT ROUTING SHEET

Date Prepared:	05/08/2024	Need Date:	05/09/2024	
PROCESSING D	EPARTMENT:	CONTRACT	ΓOR:	
Department:	Health and Human Services Agency	Name:	Volunteers of America - Northern CA, Northern NV	
Dept. Contact:	Kiera Garcia	Address:	3434 Marconi Ave	
Phone:	x6923		Sacramento, CA 95821	
Department Head Signature:	Alisha Bryden Digitally signed by Alisha Bryden Date: 2024.04.16 15:25:46 -07'00'	Phone:	916-265-3970	
<u> </u>	Alisha Bryden	Org Code: 5210110		
	Administrative Analyst Supervisor	Project Strin (if applicable	<u> </u>	
CONTRACTING				
•	Review of Amendment IV to Agreeme			
	mending to extend term by 90 days and incr	·		
Contract Term: 0	6/28/2022-9/28/2024	Contract Value	\$2,719,779	
COUNTY COUNS	SEL: (must approve all contrac	ets and MOLI's)		
Approved:	Disapproved:	Date: 05/08/20	D24 By: Nicole Wright Diseas 2004 65 08 12-2/17-0/100	
Approved:	Disapproved:	Date:	By:	
with edits as noted in em	ail			
With data do notod in one	an.			
C	OUNSEL PLEASE FORWARD TO	HR AND RISK MAN	AGEMENT THANKS!	
HR APPROVAL:				
	Human Resources requiremen	ts? Yes:	✓ No:	
<u> </u>	ed by: Misty Garcia	Digita	ally signed by Misty Garcia	
Compliance verili	ed by. Misty Sarota	Date	: 2024.05.13 10:48:34 -07'00'	
RISK MANAGEM	IENT APPROVAL: (all contract	cts & MOU's exce	pt boilerplate grant funding contracts	
Approved:	✓ Disapproved:	Date: 05/09/20	- Total Control of Control	
Approved:	Disapproved:	Date:	By:	
			-	
CTUED ADDDOL	/Al - (O if : d auton on t(a) n	C-iti	() -fft	
	/AL: (Specify department(s) page 1	articipating or dire	ectly affected by this contract).	
Departments:				
Approved:	Disapproved:	Date:	By:	
Approved:	Disapproved:	Date:	By:	
	_			
PLEASE EMAIL	SIGNED DOCUMENT TO:			