

AGREEMENT CONTRACT ROUTING SHEET

Date Prepared: 11/27/2024

Need Date: 12/13/2024

PROCESSING DEPARTMENT:**CONTRACTOR:**

Department: Health and Human Services Agency

Name: Tahoe Coalition for the Homeless

Dept. Contact: Kiera Garcia

Address: 1137 Emerald Bay Road

Phone: x6923

South Lake Tahoe, CA 96150

Department Head Signature: Alisha Bryden

Phone:

Digitally signed by Alisha Bryden
Date: 2024.11.26 11:33:45 -08'00'Alisha Bryden
Administrative Analyst Supervisor

Org Code: 5211

Project #

(if applicable):

Funding Source: HHAP Round 4

CONTRACTING DEPARTMENT: HHSA

Service Requested: Review of Funding Out Agreement #9234

Description: EDOK CoC Rapid Rehousing project through Tahoe Coalition for the Homeless to meet 5/31/25 expenditure date

Contract Term: 3/1/25-3/31/2027, w/ option to extend through 3/31/30 Contract Value: \$ 63,788.92

COUNTY COUNSEL: (Must approve all contracts and MOU's)Approved: ☒ Disapproved: ☐ Date: 12/11/2024 By: Nicole WrightApproved: ☐ Disapproved: ☐ Date: By:Digitally signed by Nicole Wright
Date: 2024.12.11 15:04:37
-08'00'

with comments as noted in email.

HR APPROVAL: WILL BE REVIEWED THROUGH WORKFLOW**RISK MANAGEMENT:** WILL BE REVIEWED THROUGH WORKFLOW

PLEASE EMAIL SIGNED DOCUMENT TO:

Thank you!