



CALIFORNIA MENTAL HEALTH SERVICES AUTHORITY  
PARTICIPATION AGREEMENT AMENDMENT  
COVER SHEET

1. El Dorado County ("Participant") desires to participate in the Program identified below.  
Name of Program: North Valley Suicide Prevention Hotline
2. This Participation Agreement Amendment extends the current term for one additional fiscal year, from 7/1/2020 to 6/30/2021, for a funding amount not to exceed \$9,000.
3. All other terms of Participation Agreement No. 462-2019-NVSPH-EDC shall remain in full force and effect.
4. Authorized Signatures:

**CalMHSA's**

Signed:  Name (Printed): John E. Chaquica, CPA, MBA, ARM  
 Title: Interim Executive Director Date: 6/20/2020

**Participant: EL DORADO COUNTY**

Signed:  Name (Printed): Brian K. Vaerkamp  
 Title: Chair, Board of Supervisors Date: 6-30-2020