

CONTRACT ROUTING SHEET

Date Prepared: 03/23/2018

Need Date: 03/30/2018

PROCESSING DEPARTMENT:

Department: CAO
Dept. Contact: Tiffany Schmid
Phone #: x-5132
Department
Head Signature: *Tiffany Schmid*

CONTRACTOR:

Name: Tahoe Prosperity Center
Address: 948 Incline Way
Incline Village, NV 89451
Phone: (775) 298-0267

CONTRACTING DEPARTMENT: CAO *Funding Agreement*

Service Requested: Approve BOS Resolution to fund \$10,000 to the Tahoe Prosperity Center solely for the purpose of helping to cover the costs associated with initiating the Tahoe Workforce Housing Project 2018-2019, with a goal of building new, modern mountain housing for local workers on the site of an old motel property in Lake Tahoe.

Contract Term: N/A Contract Value: \$10,000

Compliance with Human Resources requirements? Yes: N/A No: N/A

Compliance verified by: _____

COUNTY COUNSEL: (Must approve all contracts and MOU's)

Approved: *[check]* Disapproved: _____ Date: *4/11/18* By: *[signature]*
Approved: _____ Disapproved: _____ Date: _____ By: _____

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)

Approved: _____ Disapproved: _____ Date: _____ By: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____
N/A

EL DOR COUNTY COUNSEL
2018 MAR 23 PM 1:02

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).

Departments: N/A
Approved: _____ Disapproved: _____ Date: _____ By: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____