## AGREEMENT <br> CONTRACT ROUTING SHEET

Date Prepared: 07/29/2022
PROCESSING DEPARTMENT:

| Department: | HHSA |  |
| :---: | :---: | :---: |
| Dept. Contact: | Courtney Jenkins |  |
| Phone: | x7154 |  |
| Department Head Signature: | Kimberly McAdams, Agency Chief Fiscal Officer | Digitally signed by Kimberly Officer Officer <br> 2022.08.01 08:06:04-0700 |
|  | Kimberly McAdan |  |
|  | Agency Chief Fis | Officer |

## Need Date: 08/05/2022

## CONTRACTOR:

| Name: | Dept of Community Services and Development |
| :---: | :---: |
| Address: | 2389 Gateway Oaks Drive, Suite 100 |
|  | Sacramento, CA 95833 |
| Phone: | (916) 576-7109 |
| Org Code: | 5210100 |
| Project \# (if applicab |  |

Funding Source: Federal Grant

## CONTRACTING DEPARTMENT: HHSA

Service Requested: Legal Review
Description: New 2022 Supplemental LIHEAP Grant Funding
Contract Term: 9/1/22-6/30/23 Contract Value: \$ 127,678.00
COUNTY COUNSEL: (Must approve all contracts and MOU's)


Approved as to form - TDW

RISK MANAGEMENT: (Must approve all contracts and MOU's)


Approved: Disapproved: $\qquad$ Date: 8/8/22

$\qquad$ Disapproved: $\qquad$ Date: $\qquad$ By: $\qquad$
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