| REVIEW AND APPROVAL REQUESTED FOR:  |   |                                  |
|---|---|----------------------------------|
| Contract  | Amendment Resolution  | Ordinance Policy Other           |
| County Counsel  |   |                                  |
| REVIEW ROUTING SHEET  |   |                                  |
|   |   |                                  |
| Date Prepared:  | 10/9/25   | Need Date: 10/17/25              |
| PROCESSING DEPARTMENT   |   |                                  |
| Department:   | District Attorney   | Org Code: 2200000                |
| Dept Contact:   |   | Funding Source: CalOES VOCA/VCGF |
| Phone:  | 530-621-5640<br>Kerri Williams-Horn Digitally signed by Kerri Williams-Horn Date: 2025.10.09 12:51:49-0700' | PL String: 22CALOESUV-C40SERSUP  |
| Title:  | Agency Chief Fiscal Office  | Legistar #: TBD                  |
| CONTRACT INFORMATION  |   |                                  |
|   |   |                                  |
| CONTRA  | CT #: N/A - Grant   | CONTRACT AMENDMENT #: N/A        |
| Contracting Department: District Attorney   |   |                                  |
| Contractor/Vendor Name: CalOES  |   |                                  |
| Contract Term: 1/1/26-12/31/26 Contract Value: 224,621  |   |                                  |
| Note - HR & RISK review will take place during Fenix Contract workflow - amendments see below.                                  |   |                                  |
| ORDINANCE/RESOLUTION/POLICY INFORMATION   |   |                                  |
| TITLE / SUBJECT:  |   |                                  |
| NUMBER (If Assigned):   |   |                                  |
| DESCRIPTION AND ADDITIONAL MOTES FOR COUNTY COUNCE.   |   |                                  |
| DESCRIPTION AND ADDITIONAL NOTES FOR COUNTY COUNSEL  Review UN/UNDER SERVED VICTIM ADVOCACY(UV) Program application request and |   |                                  |
| Certificate of Assurances for period 1/1/26-12/31/26 in the project cost of \$224,621.  |   |                                  |
|   |   |                                  |
| COUNTY COUNSEL  |   |                                  |
| Approved Disapproved Date: 10/10/25 By: Roger A. Runkle Digitally signed by Roger A. Runkle Date: 2025.10.10 10:27:29 -07'00'   |   |                                  |
| Approved L  | Disapproved Date:   | By:                              |
| COMMENTS  |   |                                  |
|   |   |                                  |
| CONTRACT AMENDMENT ONLY   |   |                                  |
| HR APPROVAL   |   |                                  |
| Compliance with Human Resources requirements? Yes: No: No:  |   |                                  |
| RISK APPROVAL   |   |                                  |
| Approved Disapproved Date: By:  |   |                                  |
| Approv  |   |                                  |
| COMMENTS  |   |                                  |