

CONTRACT AMENDMENT ROUTING SHEET

Date Prepared: 02/26/2024

Need Date: 03/29/2024

PROCESSING DEPARTMENT:

Department: Health and Human Services Agency
Dept. Contact: Courtney Jenkins
Phone: x7154
Department Head Signature: Alisha Bryden
Digitally signed by Alisha Bryden
Date: 2024.03.06 15:43:51 -08'00'
Alisha Bryden
Administrative Analyst Supervisor

CONTRACTOR:

Name: The Boys and Girls Club of lake Tahoe
Address: 1100 Lyons Avenue
South Lake Tahoe, California 96150
Phone: _____
Org Code: 5400
Project String (if applicable): _____

CONTRACTING DEPARTMENT: HHS

Service Requested: Legal Review

Description: Amendment 1, Term Extension and updated HHS Contract Administrator language

Contract Term: Upon execution to 7/1/25 (+1 Year Term Extension Option) Contract Value: \$75,000

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

Approved: Disapproved: Date: 04/02/2024 By: Nicole Wright
Digitally signed by Nicole Wright
Date: 2024.04.02 15:25:41 -07'00'
Approved: Disapproved: Date: _____ By: _____

with edits as noted in email.

COUNSEL -- PLEASE FORWARD TO HR AND RISK MANAGEMENT -- THANKS!

HR APPROVAL:

Compliance with Human Resources requirements? Yes: No:
Compliance verified by: _____

RISK MANAGEMENT APPROVAL: (all contracts & MOU's except boilerplate grant funding contracts)

Approved: Disapproved: Date: 04/06/2024 By: Lavleen K. Cheema
Digitally signed by Lavleen K. Cheema
Date: 2024.04.06 00:13:48 -07'00'
Approved: Disapproved: Date: _____ By: _____

It is recommended to update the Indemnity provisions with the most recent County standard language.

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

Departments:
Approved: Disapproved: Date: _____ By: _____
Approved: Disapproved: Date: _____ By: _____

PLEASE EMAIL SIGNED DOCUMENT TO: