

Agreement # \_\_\_\_\_ - Amendment # 1 Legistar # \_\_\_\_\_

# REVENUE, POLICY, ETC. ROUTING SHEET

Date Prepared: 12/7/21

Need Date: 12/16/21

### PROCESSING DEPARTMENT:

Department: HHSA  
Dept. Contact: Alisha Bryden  
Phone: 707-688-7629  
Department Head Signature: Nita Wracker, CPA  
Digitally signed by Nita Wracker, CPA  
Date: 2021.12.07 14:55:46 -08'00'  
Nita Wracker, MBA, CPA  
Agency Chief Fiscal Officer

### CONTRACTOR:

Name: State of CA, Department of Housing and Community Development  
Address: 220 W. El Camino Ave, Suite 130  
Sacramento, CA 95252  
Phone: \_\_\_\_\_  
Org Code: 5130  
Project String (if applicable): SS 51

### CONTRACTING DEPARTMENT:

HHSA- Social Services

Service Requested: Re-review Resolution for the Housing Navigator Program Grant Funding (Changed paragraph 1 to add in statute  
Description: \_\_\_\_\_

Contract Term: NA Contract Value: 28,000

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

Approved:  Disapproved:  Date: 12/08/2021 By: Abigail L. Roseman  
Digitally signed by Abigail L. Roseman  
Date: 2021.12.08 08:50:19 -08'00'  
Approved:  Disapproved:  Date: \_\_\_\_\_ By: \_\_\_\_\_

County Counsel, Paula Frantz approved this Resolution on 10/7/21, Paragraph 1 was updated to add in the funding Statute so is being resubmitted for RUSH approval.

### 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: \_\_\_\_\_ By: \_\_\_\_\_  
Approved:  Disapproved:  Date: \_\_\_\_\_ By: \_\_\_\_\_

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

Departments: \_\_\_\_\_  
Approved:  Disapproved:  Date: \_\_\_\_\_ By: \_\_\_\_\_  
Approved:  Disapproved:  Date: \_\_\_\_\_ By: \_\_\_\_\_