

CONTRACT AMENDMENT ROUTING SHEET

Date Prepared: 12/18/2023

Need Date: 01/16/2024

PROCESSING DEPARTMENT:

Department: Health and Human Services Agency
Dept. Contact: Max Hudock
Phone: X6921
Department Head Signature: Alisha Bryden
Digitally signed by Alisha Bryden
Date: 2023.12.19 12:54:06 -08'00'
Alisha Bryden
Administrative Analyst Supervisor

CONTRACTOR:

Name: New Morning Youth and Family Services, Inc.
Address: 6765 Green valley Road
Placerville, CA 95667
Phone: _____
Org Code: 5130
Project String
(if applicable): _____

CONTRACTING DEPARTMENT: HHS

Service Requested: Legal Review
Description: Amendment II to increase the NTE to \$150,000, update the Scope of Services
Contract Term: 6/25/22-6/24/25 Contract Value: \$150,000

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

Approved: Disapproved: Date: 01/03/2024 By: Jefferson Billingsley
Digitally signed by Jefferson Billingsley
Date: 2024.01.03 11:15:08 -08'00'
Approved: Disapproved: Date: _____ By: _____

*With edits of 1/3/24

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

HR APPROVAL:

Compliance with Human Resources requirements? Yes: No:
Compliance verified by: Misty Garcia
Digitally signed by Misty Garcia
Date: 2024.01.04 06:27:24 -08'00'

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

Approved: Disapproved: Date: 01/03/2024 By: Michael Andersen
Digitally signed by Michael Andersen
Date: 2024.01.03 15:17:38 -08'00'
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: _____

PLEASE EMAIL SIGNED DOCUMENT TO: