

REVIEW AND APPROVAL REQUESTED FOR:

☒ Contract ☐ Amendment ☐ Resolution ☐ Ordinance ☐ Policy ☐ Other

**County Counsel
REVIEW ROUTING SHEET**

Date Prepared: 12/3/24

Need Date: 12/18/24

PROCESSING DEPARTMENT

Department: HHSA

Org Code: 5211

Dept Contact: Kiera Garcia

Funding Source: HHAP-1

Phone: x6923

PL String: _____

Department _____

Head Signature: Alisha Bryden

Legistar #: 24-2110

Digitally signed by Alisha Bryden
Date: 2024.12.03 15:25:58 -08'00'

CONTRACT INFORMATION

CONTRACT #: 9239

CONTRACT AMENDMENT #: n/a

Contracting Department: HHSA

Contractor/Vendor Name: Tahoe Coalition for the Homeless

Contract Term: 4/1/25-4/30/27, or 4/30/30

Contract Value: \$113,442.75

Note - HR & RISK review will take place during Fenix Contract workflow - except for contract amendments.

ORDINANCE/RESOLUTION/POLICY INFORMATION

TITLE / SUBJECT: _____

NUMBER (If Assigned): _____

ADDITIONAL DETAILS AND NOTES FOR COUNTY COUNSEL

COUNTY COUNSEL

<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	Date: <u>12/18/24</u>	By: <u>Nicole Wright</u>	<small>Digitally signed by Nicole Wright Date: 2024.12.18 10:52:27 -08'00'</small>
<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	Date: _____	By: _____	

COMMENTS
