

# REVENUE, POLICY, ETC. ROUTING SHEET

Date Prepared: 06/08/2021

Need Date: 06/16/2021

**PROCESSING DEPARTMENT:**

Department: Health and Human Services Agency  
Dept. Contact: Consie Mote  
Phone: Ext. 7118  
Department: Nita Wracker  
Head Signature: MBA CPA  
Digitally signed by Nita Wracker  
MBA CPA  
Date: 2021.06.08 14:06:54  
+07'00'  
Nita Wracker, Agency Chief Fiscal Officer

**CONTRACTOR:**

**RUSH TO MEET 7/13 DEADLINE)**

Name: CA Business consumer Services and Housing Agency (BCSH)  
Address: 915 Capitol Mall, Suite 350-A  
Sacramento, CA 95814  
Phone: \_\_\_\_\_  
Org Code: 5211  
Project String  
(if applicable): \_\_\_\_\_

**CONTRACTING DEPARTMENT:**

Health and Human Services Agency

Service Requested: Review of Award for County of El Dorado Continuum of Care (EDOK) (CoC)

Description: Homeless Housing, Assistance and Prevention Round 2 (HHAP-2) grant- Awarded to CoC

Contract Term: upon execution- 06/30/2026 Contract Value: 341,680

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

Approved:  Disapproved:  Date: 06/10/2021 By: Paula Frantz  
Approved:  Disapproved:  Date: \_\_\_\_\_ By: \_\_\_\_\_  
Digitally signed by Paula Frantz  
Date: 2021.06.10 16:13:43 -07'00'

**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: 06/11/2021 By: Michael Andersen  
Approved:  Disapproved:  Date: \_\_\_\_\_ By: \_\_\_\_\_  
Digitally signed by Michael Andersen  
Date: 2021.06.11 08:36:44 -07'00'

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

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