## AGREEMENT CONTRACT ROUTING SHEET

Date Prepared:	09/03/2024		Need Date:	09/09/2024
PROCESSING DEPARTMENT:			CONTRACTOR:	
Department: Dept. Contact: Phone: Department Head Signature:	CAO Fiscal for District Attorney  Justene Cline  530-621-5640		Name: Address:	California Governor's Office of Emergency Services
				Mather, CA 95655
		Digitally signed by Kerri Williams- lorn Date: 2024.09.03 14:07:56 -07'00'	Phone:	916-845-8451
	Kerri Williams-Horn Agency Chief Fiscal Officer		Org Code: Project # (if applicable	
CONTRACTING	DEPARTMENT:	District Attorney	Funding Sou	urce: CalOES VOCA/VWA0/VCGF Funding
Service Requeste				
Contract Term: 1		istrict Attorney, or his de	Signee, as the CalOES  Contract Value	grants Authorized Agent. \$\cdot\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Approved:	SEL: (Must appr ✓ Disappro Disappro	oved:	and MOU's) Date: 09/05/200	By: Roger A. Runkle Digitally signed by Roger A. Runkle Digitally signed by Roger A. Runkle Digitally 2004 00.05 14-16-45 -07001  By:
HR APPROVAL:	WILL BE REVIE	EWED THROUG	H WORKFLOW	<i>I</i>

PLEASE EMAIL SIGNED DOCUMENT TO: justene.cline@edcgov.us

RISK MANAGEMENT: WILL BE REVIEWED THROUGH WORKFLOW

Thank you!