

CALIFORNIA MENTAL HEALTH SERVICES AUTHORITY
PARTICIPATION AGREEMENT AMENDMENT
COVER SHEET

1. El Dorado County ("Participant") desires to participate in the Program identified below.
Name of Program: North Valley Suicide Prevention Hotline
2. This Participation Agreement Amendment extends the current term for one additional fiscal year, from 7/1/2021 to 6/30/2022, for a funding amount not to exceed \$11,888.48.
3. All other terms of Participation Agreement No. 462-2019-NVSPH-EDC and 462-2019-NVSPH-EDC-A1 shall remain in full force and effect.
4. Authorized Signatures:

CalMHSA

DocuSigned by:

Signed: Amie Miller
21190CA3D8784D6...

Name (Printed): Amie Miller, PsyD., LMFT

Date: 4/19/2021

Title: Executive Director

Participant: EL DORADO COUNTY

Signed: _____

Name (Printed): _____

Title: _____

Date: _____