

RESOLUTION ROUTING SHEET

Date Prepared: 08/31/2023

Need Date: 08/31/2023

PROCESSING DEPARTMENT:

Department: HHSA

Contact Name: Lisa Konyecsni

Phone: 295-6901

Email Address: lisa.konyecsni@edcgov.us

Department Head Signature: Alisha Bryden Digitally signed by Alisha Bryden
Date: 2023.08.31 10:00:38 -0700'

Requesting Department: Community Services Org Code: 5210115

Service Requested: Resolution Review

Description:
Resolution required by CA Dept. of Housing and Community Development in order to apply for the Emergency Solutions Grants program funding. It is on their required template.

COUNTY COUNSEL:

Approved:

Disapproved:

Date: 8/31/2023

County Counsel Signature: Daniel Vandekoolwyk Digitally signed by Daniel Vandekoolwyk
Date: 2023.08.31 14:12:49 -07'00'

County Counsel Comments:

HR APPROVAL: N/A (Resolution)

RISK MANAGEMENT: N/A (Resolution)

PLEASE EMAIL CHANGES/APPROVAL TO DEPARTMENT CONTACT