

AGREEMENT CONTRACT ROUTING SHEET

Date Prepared: 07/07/2021

Need Date: 07/27/2021

PROCESSING DEPARTMENT:

Department: Health and Human Services Agency

Dept. Contact: Kathryn Deffebach

Phone: x7147

Department: Nita Wracker

Head Signature: MBA CPA

Digitally signed by Nita Wracker
MBA CPA
Date: 2021.07.08 08:57:16 -07'00'

CONTRACTOR:

Kayna

Name: Kanya Westley, LLC / Best Western Stagecoach Inn

Address: 5940 Pony Express Trail

Pollock Pines, CA

Phone: _____

Org Code: 50100

Project # _____

(if applicable): 50DISASTER-50NONICR-50100-WS

Funding Source: COVID-19 Agmt

CONTRACTING DEPARTMENT: Health and Human Services Agency

Service Requested: Rental of hotel rooms for placement/isolation of medically vulnerable homeless individuals

Description: Lease of rooms on a month to month basis. This is a renewal that will be retroactive to July 12, 2021

Contract Term: 7/12/21- until not needed Contract Value: \$ 342,576.00

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

Approved: Disapproved: Date: 07/13/2021 By: Paula Frantz

Approved: Disapproved: Date: _____ By: _____

Digitally signed by Paula Frantz
Date: 2021.07.13 12:22:01
-07'00'

HR APPROVAL: WILL BE REVIEWED THROUGH WORKFLOW

RISK MANAGEMENT: WILL BE REVIEWED THROUGH WORKFLOW

PLEASE EMAIL FOR PICK-UP cao-contracts-newrequests@edcgov.us Thank you!