

Agreement # 9084

Legistar # 24-1772

AGREEMENT CONTRACT ROUTING SHEET

Date Prepared: 10/28/2024

Need Date: 10/31/2024

PROCESSING DEPARTMENT:

Department: Health and Human Services Agency
Dept. Contact: Courtney Jenkins
Phone: x7154
Department Head Signature: Alisha Bryden
Digitally signed by Alisha Bryden
Date: 2024.10.01 16:11:12 -07'00'
Alisha Bryden
Administrative Analyst Supervisor

CONTRACTOR:

Name: El Dorado Community Heath Center
Address: 4212 Missouri Flat Road
Placerville, CA 95667
Phone: 530-621-7700
Org Code: 5440
Project #
(if applicable): _____
Funding Source: _____

CONTRACTING DEPARTMENT: HHSA

Service Requested: Legal Review

Description: ARPA Funding Out, Dental Equipment for EDCHC South Lake Tahoe Dental Site

Contract Term: Upon Execution through December 31, 2025 Contract Value: \$ 400,000.00

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

Approved: <input checked="" type="checkbox"/>	Disapproved: <input type="checkbox"/>	Date: <u>10/24/2024</u>	By: <u>Nicole Wright</u> <small>Digitally signed by Nicole Wright Date: 2024.10.24 12:55:42 -07'00'</small>
Approved: <input checked="" type="checkbox"/>	Disapproved: <input type="checkbox"/>	Date: <u>10/29/2024</u>	By: <u>Nicole Wright</u> <small>Digitally signed by Nicole Wright Date: 2024.10.29 09:17:42 -07'00'</small>

with edits noted in email.

Resubmission 10/28/24

HR APPROVAL: WILL BE REVIEWED THROUGH WORKFLOW

RISK MANAGEMENT: WILL BE REVIEWED THROUGH WORKFLOW

PLEASE EMAIL SIGNED DOCUMENT TO:

Thank you!