

CONTRACT AMENDMENT ROUTING SHEET

Date Prepared: 12/10/2024

Need Date: 12/17/2024

PROCESSING DEPARTMENT:

Department: Health and Human Services Agency
Dept. Contact: Kiera Garcia
Phone: x6923
Department Head Signature: Alisha Bryden
Digitally signed by Alisha Bryden
Date: 2024.11.25 16:22:22 -08'00'
Alisha Bryden
Administrative Analyst Supervisor

CONTRACTOR:

Name: Mercy Housing California XXI, LLP
Address: 1360 Mission St, Suite 300
San Francisco, CA 94103
Phone: _____
Org Code: 5280
Project String
(if applicable): n/a

CONTRACTING DEPARTMENT: HNSA

Service Requested: Review of Amendment II to PHA HAP Agreement #5904

Description: Amending to extend term for an additional 20 years through March 20, 2045

Contract Term: 3/20/2025 - 3/20/2045 Contract Value: 0.00

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

Approved: Disapproved: Date: 12/09/2024 By: Nicole Wright
Digitally signed by Nicole Wright
Date: 2024.12.09 16:50:27 -08'00'
Approved: Disapproved: Date: _____ By: _____

with edits noted in email.

COUNSEL -- PLEASE FORWARD TO HR AND RISK MANAGEMENT -- THANKS!

HR APPROVAL:

Compliance with Human Resources requirements? Yes: No:
Compliance verified by: Sera Salmalyan
Digitally signed by Sera Salmalyan
Date: 2024.12.10 14:09:43 -08'00'

RISK MANAGEMENT APPROVAL: (all contracts & MOU's except boilerplate grant funding contracts)

Approved: Disapproved: Date: 12/10/2024 By: Jordan A. Brown
Digitally signed by Jordan A. Brown
Date: 2025.01.21 10:56:14 -08'00'
Approved: Disapproved: Date: _____ By: _____

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).

Departments:
Approved: Disapproved: Date: _____ By: _____
Approved: Disapproved: Date: _____ By: _____

PLEASE EMAIL SIGNED DOCUMENT TO: