| Agreement # 5919 | - Amendment # A2 | Legistar # 22-1440 |
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| | | |

CONTRACT AMENDMENT ROUTING SHEET

| Date Prepared: 08/24/2022 | | Need Date: | 09/01/2022 | |
|--|--|------------------------------|--|--|
| PROCESSING D | EPARTMENT: | CONTRACT | OR: | |
| Department: Health and Human Services Agency | | Name: | Center for Common Concerns (Homebase) | |
| Dept. Contact: | ept. Contact: Lisa Konyecsni | | 870 Market St., Ste 1288 | |
| Phone: | | | San Francisco, CA 94102 | |
| Department Head Signature: | Kimberly McAdams, Agency Chief Fiscal Officer Digitally signed by Kimberly McAdams, Agency Chief Fiscal Officer Date: 2022.08.29 17:13:36-07'00' | Phone: | | |
| Ü | Kimberly McAdams | Org Code: | 5210113, 5210114, 5210116 | |
| | Agency Chief Fiscal Officer | Project Strin (if applicable | • | |
| CONTRACTING | | n Services Agency - Hor | neless and Housing | |
| Service Requeste | | | | |
| · · · · · · · · · · · · · · · · · · · | nendment extends the term, increases the N | | | |
| Contract Term: 9 | /01/21 - 9/30/23 (prior term date 9/30/22) | _ Contract Value | \$550,000 (increase of \$300K) | |
| Approved: | SEL: (must approve all contraction of the contracti | Date:09/01/20 Date: | By: Paula Frantz Date: 2022/1960 1 465505-0700 By: | |
| C | OUNSEL PLEASE FORWARD TO | HR AND RISK MAN | AGEMENT THANKS! | |
| | Human Resources requirement ed by: Sera Salmanyan Digitally signed by Sera Date: 2022.09.02 10:10:2 | | No: | |
| RISK MANAGEN | IENT APPROVAL: (all contrac | ts & MOU's excer | ot boilerplate grant funding contracts | |
| Approved: | ✓ Disapproved: | Date: 09/02/20 | | |
| Approved: | Disapproved: | Date: | By: | |
| OTHER APPROV | /AL: (Specify department(s) pa | articinating or dire | ctly affected by this contract) | |
| Departments: | AL. (Opcony department(s) pe | aradipating or dife | ony arroaded by aris contract). | |
| Approved: | Disapproved: | Date: | By: | |
| Approved: | Disapproved: | Date: | By: | |
| | | | | |