## To Course | 12/2/2019

| Date Prepared:   | <del>11/22/19</del>   | Need Date:  | 12/6/19 12/13/2019   |
|--|---|---|--|
|  |   |   |  |
| PROCESSING D   | EPARIMENI:  | CONTRACT  | The Center for Common  |
| Department:  | HHSA  | Name:   | Concerns, Inc., / HomeBase   |
| Dept. Contact:   | Consie Mote   | Address:  | 870 Market Street, Ste 1228  |
| Phone:   | 7118  |   | San Francisco, CA 94102-2926   |
| Department Head Signature:   | 006   | Phone:  |  |
| Head Signature.  | Donald Semon, Director  | Org Code:   | 5210   |
| ⊠Auditor/C   | ontroller Notified □N/A – Und   | der \$100k  |  |
| CONTRACTING I  | DEPARTMENT: Health and I  | Human Services A  | Agency   |
| Service Requeste   | <ul> <li>d: Consultant provides strates</li> <li>Care, El Dorado Opportunit</li> </ul>          |   | echnical assistance to Continuum of  |
| Contract Term: 9   | 9/25/19-12/31/2020  |   | \$127,000 ( increase of 75K)   |
| Approved:  | BEL: (Must approve all contraction Disapproved: Disapproved: Disapproved: PLEASE FORWARD TO RIS | Date:   | By: Pobuld By:   |
| RISK MANAGEM   | ENT: (All contracts and MOU's   |   |  |
| Approved:  | Disapproved:  |   | ec2019 By:   |
| Approved:  | Disapproved:  | Date:   | By:  |
|  |   |   | PM4:E3 HR/PM NEC 13/19   |
| <b>NOTE:</b> Any contract electronic information related, especially the | , the acquisition of software or com  | ation, implementation<br>puter related items,<br>ommunications, mus | <ul> <li>storing, retrieving, transfer, or sending of<br/>or any other service/item that may be IT<br/>t be approved by IT before submission to</li> </ul> |

PLEASE EMAIL HHSA CONTRACTS@EDCGOV.US FOR PICK-UP...THANKS!