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## AGREEMENT CONTRACT ROUTING SHEET

Date Prepared:	05/21/2020	Need Date:	05/29/2020
PROCESSING D	EPARTMENT:	CONTRACT	Needs to be on the 06-23-2020 Agenda <b>TOR:</b>
Department:	Health and Human Services Agency	Name:	CA Dept. of Community Services & Development
Dept. Contact:	Zhana Mc Cullough	Address:	2389 Gateway Oaks Drive, Suite 100
Phone:	Ext. 7154		Sacramento, CA 95833
Department Head Signature:	Yvonne Kollings Digitally signed by Yvonne Kollings DN: cn=Yvonne Kollings, enHHSA, outsilessed Unit, email=yvonne kollings,@edegov.us, c=US Date: 2020.05.21 09:26:43-0700	Phone:	
Č		Org Code: Project #	5210
		(if applicable	e):
		Funding Sou	urce: Federal - CARES Act (COVID-19)
CONTRACTING	DEPARTMENT: Health and Huma	n Services Agency	
Service Requeste	Review of resolution delegating signature	re authority to the HHSA [	Director to accept CARES Act funding from CSD.
Description: CSD	requires a resolution to demonstrate that the	County accepts funds prov	vided under Agreement 20F-3648.
Contract Term: U	pon signature until 20F-3648 is terminated.	Contract Value	<b>9:</b> \$ 0.00
COLINTY COLING	SEL: (Must approve all contrac	ete and MOLI'e)	
Approved:	Disapproved:	Date: 05/26/20	D20 By: Paula Frantz Digitally algored by Digitally algored by Digitally algored by Digitally algored by Dig
Approved:	Disapproved: Disapproved:	Date:	By:
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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!