Agreement # 5836 - Amendment # 1 Legista	ar #	ŧ	2	1-	-1	4	K	3	ł	5	2	ì	;	ì	ì	ì
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## **CONTRACT AMENDMENT ROUTING SHEET**

OR: Tahoe Coalition for the Homeless P.O. Box 13514 South Lake Tahoe, CA 96151  9  \$410,000 (increase of \$260,000)
P.O. Box 13514 South Lake Tahoe, CA 96151
South Lake Tahoe, CA 96151
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\$410,000 (increase of \$260,000)
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## PLEASE EMAIL FOR PICK-UP hhsa-contracts@edcgov.us Thank you!

Agreement #	5836	- Amendment #	1	Legistar # <u>21-1436</u>
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## CONTRACT AMENDMENT ROUTING SHEET

Date Prepared:	08/30/2021	Need Date:	09/03/2021
PROCESSING D	EPARTMENT:	CONTRACT	OR:
Department: Dept. Contact:	Health and Human Services Agency	Name:	Tahoe Coalition for the Homeless
	Kathryn Deffebach	Address:	P.O. Box 13514
Phone:	x7147		South Lake Tahoe, CA 96151
Department Head Signature:	Nita Wracker Digitally signed by Nita Wracker MBA CPA Date: 2021.08.30 11:37:18 -07'00'	Phone:	
	Nita Wracker, Agency CFO	Org Code:	
		Project String	9
		(if applicable	
CONTRACTING	DEPARTMENT: Health and Huma	n Services Agency	
Service Requeste	d: Review and approval of Amendment I	to Agreement 5836	
Description: A1	increases the available funding in this agre	ement.	
Contract Term: 07	7-12-2021 until terminated (No Change)	Contract Value:	\$410,000 (increase of \$260,000)
	EL: (must approve all contrac		D
Approved:	Disapproved:	Date:	By:
Approved:	Disapproved:	Date:	By:
HR APPROVAL: Compliance with H	DUNSEL PLEASE FORWARD TO Human Resources requirement ed by: Lauren Montalvo	s? Yes:	AGEMENT – THANKS!
		ts & MOLI's eveen	t boilerplate grant funding contracts)
	Disapproved:	Date: 08/30/202	
Approved:	Disapproved:	Date:	By:
OTHER APPROV Departments:	AL: (Specify department(s) pa	rticipating or direc	tly affected by this contract).
Approved:	Disapproved:	Date:	By:
Approved:	Disapproved:	Date:	Ву:

## PLEASE EMAIL FOR PICK-UP hhsa-contracts@edcgov.us Thank you!