## **AGENDA MATERIAL**

DATE 9-6-22 ITEM NO. CC 8

## THE APPLICABLE SECTION(S) BELOW MUST BE COMPLETED

Click or tap the boxes to enter text, if not applicable, indicate "N/A". Make sure to complete mandatory (\*) fields

Document Type:	De	partment C	Code:		Contract Num	oer (i.e., 15-123): _	· · · · · · · · · · · · · · · · · · ·	
Commencement Date:	Termination Date:			Prior Contract Number (Synergen/CMS):			'CMS):	
Expense Amount \$	*			Reven	ue Amount: \$			
*Funding Source(s) required:						/		
Funding from General Fund?	© Yes .○ N	0	If Yes\$			%	- -	
Contract is fully or partially fun			€ Yes	<b>™</b> No				
Were insurance or indemnity of If Yes, attach Risk's approval.	clauses modified	?		<b>™</b> No				
Vendor is using a Social Securit If Yes, attach the required form		e Procedure 2	© Yes 22-10.	€ No				
Amendment / Revised Awar	d Information							
Document Type: <u>CT</u>	Dep	artment Co	ode: <u>FNC</u>		Contract Num	oer (i.e., 15-123): <u>2</u>	21*197	
Amendment No.: 6 6 6				AMS	Version No.: 80	<u>/</u>		
Commencement Date: 9/20/2	2022			New	Termination Date	: <u>9/19/2023</u>		
				Prior	Contract No. (Syn	ergen/CMS): <u>CJ-</u>	FN-174123	
s there revenue included?	© Increase € No.	o If \	res \$		unt This Amendm			
s there revenue included? *Funding Source(s) required:	O Yes O No COUNTY AD	o If \	res\$	EUNP		ay Fund	<u>100.00</u>	
Is there revenue included? *Funding Source(s) required: Funding from General Fund?	O Yes O No O Yes O No	o If \ oministr	/es \$ /ATOR'S /es \$ <u>25,0</u> 0	EUNP 00.00	Continge	ay Fund	<u>100.00</u>	
Is there revenue included? *Funding Source(s) required: Funding from General Fund? Grant/Amendment Informat	Yes O No Yes O No Yes O No tion (for grants	or If North Is The If North Is acceptance	/es \$ /ATOR'S /es \$ 25,00 e and awar	00.00 (c)	Continger May Award	wy Fund % © Amendment		
Is there revenue included?  *Funding Source(s) required:  Funding from General Fund?  Grant/Amendment Informat  Document Type:	Yes O No Yes O No Yes O No tion (for grants	o If No. 16 No.	Yes \$ Yes \$ <u>25,00</u> e and awar ode:	EUND (00.00) ds)	Continger  Mayard  Grant Number	% Amendment (i.e., 15-123):	<del>.</del>	
Is there revenue included?  *Funding Source(s) required: Funding from General Fund?  Grant/Amendment Informat  Document Type:  Commencement Date:	Yes O No Yes O No Yes O No tion (for grants	o If No. 16 No.	Yes \$ Yes \$ <u>25,00</u> e and awar ode:	EUND 00.00 ds)	Continger  Mayard  Grant Number	Mamendment (i.e., 15-123): mendment Number	<del>.</del>	
Is there revenue included?  *Funding Source(s) required:  Funding from General Fund?  Grant/Amendment Informat  Document Type:	Yes O No Yes O No Yes O No tion (for grants	o If No. 16 No.	Yes \$ Yes \$ <u>25,00</u> e and awar ode:	EUND 00.00 ds)	Grant Number	Mamendment (i.e., 15-123): mendment Number	<del>.</del>	
Is there revenue included?  *Funding Source(s) required:  Funding from General Fund?  Grant/Amendment Informat  Document Type:  Commencement Date:  Match Amount: \$  *All Funding Source(s) requir	Yes No Yes No Yes No O No tion (for grants Dep	o If No. 16 No.	Yes \$ Yes \$ 25,00 e and awar ode: nation Date	EUND 00.00 ds)	Grant Number Amount: \$	Mamendment (i.e., 15-123): mendment Number	<del>.</del>	
Is there revenue included?  *Funding Source(s) required:  Funding from General Fund?  Grant/Amendment Informat  Document Type:  Commencement Date:  Match Amount: \$	Yes No Yes No Yes No O No Tion (for grants Dep  red:	o If No	Yes \$ Yes \$ <u>25,00</u> e and awar ode: nation Date	00.00 ds) e:	Grant Number Amount: \$	Mamendment (i.e., 15-123): mendment Number	<del>.</del>	
Is there revenue included?  *Funding Source(s) required:  Funding from General Fund?  Grant/Amendment Informat  Document Type:  Commencement Date:  Match Amount: \$  *All Funding Source(s) requir  *Match funding from General	Yes No Yes No Yes No Yes No O Tion (for grants Dep Yed:  Al Fund? Yes Sources? Yes	o If No	Yes \$ Yes \$ 25,00 e and awar ode: nation Date If Yes	00.00 ds)  Revenue	Amount: \$	%	er:	?
Is there revenue included?  *Funding Source(s) required:  Funding from General Fund?  Grant/Amendment Informat  Document Type:  Commencement Date:  Match Amount: \$  *All Funding Source(s) requir  *Match funding from General  *Match funding from other s  *Funding Source:   *If Federal funds are received	Yes No Yes No Yes No Yes No O Tion (for grants Dep Yed:  Al Fund? Yes Sources? Yes	o If No	Yes \$ Yes \$ 25,00 e and awar ode: nation Date If Yes	00.00 ds)  Revenue	Amount: \$	%	er:	?
Is there revenue included?  *Funding Source(s) required: Funding from General Fund?  Grant/Amendment Informat  Document Type:  Commencement Date:  Match Amount: \$  *All Funding Source(s) requir  *Match funding from General  *Match funding from other s  *Funding Source:  *If Federal funds are received.	Yes No  Yes No  Yes No  Tion (for grants  Dep  Ted:  Al Fund? Yes  Sources? Yes  d, is funding col	o If No	Yes \$ Yes \$ 25,00 e and awar ode: nation Date If Yes	00.00 ds)  Revenue	Grant Number Amount: \$	% % Ssed through other	er:er organization(s)	?
Is there revenue included?  *Funding Source(s) required: Funding from General Fund?  Grant/Amendment Informat  Document Type:  Match Amount: \$  *All Funding Source(s) requir  *Match funding from General  *Match funding from other s  *Funding Source:  Contact: Deimos Thorne  Department: PCAO Civil Divisions	Yes O No  Yes O No  tion (for grants  Dep  red: al Fund? O Yes  sources? O Yes  d, is funding con	o If No	Yes \$ Yes \$ 25,00 e and awar ode: nation Date If Yes	00.00 ds)  Revenue	Grant Number Amount: \$	% % % mendment Number % % ssed through other	er: er organization(s)	?
Is there revenue included?  *Funding Source(s) required: Funding from General Fund?  Grant/Amendment Informat  Document Type:  Commencement Date:  Match Amount: \$  *All Funding Source(s) requir  *Match funding from General  *Match funding from other s  *Funding Source:  *If Federal funds are received.	Yes O No  Yes O No  tion (for grants  Dep  red: al Fund? O Yes  cources? O Yes  d, is funding col	o If No	Yes \$ Yes \$ 25,00 e and awar ode: nation Date If Yes	00.00 ds)  Revenue	Grant Number Amount: \$	% % Ssed through other	er: er organization(s)	?