

□No ⊠N/A

Committee of the Whole

Cynthia Foley

Council	Initiated:
□Yes	

⊠No

ECAF: 2025-1489 Motion: 25-229	Subject:	Department of Social and Health Services Contract Signature Authorization Form
Type: □ Contract □ Board Appt. □ Code Amendment	Scope:	The Washington State Department of Social and Health Services (DSHS) Aging and Disability Administration (ADSA) requires Council approval of a signature authorization form. Motion 25-229 approves submission of this form.
☐ Budget Action ☐ Other		The Signature Authorization Form is for DSHS use only. It grants no authority to County personnel. The form is used to ensure that the contracts received at DSHS from the County are signed by an authorized
Requested Handling: Normal		person.
	<u>Duration:</u>	The form is updated as needed to reflect personnel changes.
Fund Source:	Fiscal Impac	t: □Current Year □Multi-Year 図N/A
☐General Fund☐Other	Authority Granted: N/A	
⊠N/A	Background:	On November 25, 2024, Council passed Motion 24-378 ¹ approving the
Executive Rec:	2025 Department of Human Services Grant Work Plan. The grant work plan includes	
⊠Approve	several aging services grants with DSHS.	
☐ Do Not Approve	_	
□N/A	Requested A	action: Consider taking action on Motion 25-229.
Approved as to		
Form:		
Voc		

¹ Snohomish County Council - File #: 2024-2025