

## Harris County, Texas

1001 Preston St., 1st Floor Houston, Texas 77002

## Legislation Text

File #: 21-4666, Version: 1
Department: Purchasing
Department Head/Elected Official: DeWight Dopslauf, Purchasing Agent, Purchasing Department
Regular or Supplemental RCA:   Regular RCA
□ Supplemental RCA
Type of Request: Proposals/Bids
Project ID (if applicable):
Vendor/Entity Legal Name (if applicable):
MWDBE Participation (if applicable):
Request Summary (Agenda Caption): Request for approval of a project scheduled for advertisement and consent for Request for Proposal for innovative, evidenced-based, and promising model approaches to community engagement programs and to mitigate non-appearances to misdemeanor court for the Justice Administration Department (210291).
Background and Discussion:
Expected Impact:
Alternative Options:
Alignment with Goal(s):
☐ Justice and Safety ☐ Economic Opportunity
☐ Housing
☐ Public Health
☐ Transportation

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<ul> <li>☐ Flooding</li> <li>☐ Environment</li> <li>☐ Governance and Customer Service</li> </ul>
Prior Court Action (if any):
Location: Address (if applicable list below):
☐ Countywide ☐ Precinct 1 ☐ Precinct 2 ☐ Precinct 3 ☐ Precinct 4

Fiscal and Pers	onnel Summ	ary			
Service Name	-		FY 21-22	Estimates	
				FY 22	Next 3 FYs
Incremental Exp	enditures			•	•
Labor Expenditures			-	-	-
Non-Labor Expenditures			-	-	-
Total Incremental Expenditures			-	-	-
Funding Sources	(General Fund, P	IC Fund, Debt or C	P, Grants, or Ot	ther - Please Spe	cify)
Existing Budget		-	-	-	-
		-	-	-	-
		-	-	-	-
Total Current Budget		-	-	-	
Additional Budget Requested		-	-	-	-
		-	-	-	-
		-	-	-	-
Total Additional Budget Requested		-	-	-	
Total Funding Sources			-	-	-
Personnel (Fill ou	t section only if r	equesting new PCI	Ns)		•
Current Position Count for Service			-	-	-
Additional Positions Requested			-	-	-
Total Personnel			-	-	-

## **Anticipated Implementation Date:**

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Emergency/Disaster Recovery Note:
$\square$ Not an emergency, disaster recovery, or COVID-19 related item
<ul> <li>□ Emergency Item</li> <li>□ COVID-19 related Item</li> <li>□ Disaster Recovery related Item</li> </ul>
Contact(s) name, title, department:
Attachments (if applicable):