Dane County Department of Human Services

Director – Lynn Green 1202 Northport Drive, Madison, WI 53704-2092 PHONE: (608) 242-6200 FAX: (608) 242-6293



CONTRACT ADDENDUM

Date:	2/6/2019	Division:	ACS
Provider Name:	Porchlight, Inc.	Contract Number:	84458
Addendum Amount:	\$65,000.00	Addendum #:	1
Contracted Service:	Case Management		
Addendum Reason:	\$65,000 of Medicaid Crisis contingent fundi line.	ing is being added to the Safe	Haven Case Mgmt

Original contract amount		418,121.00
Net change by previously authorized addenda		-
Contract amount prior to this addendum		418,121.00
This addendum will increase the Contract amount by		65,000.00
The new contract amount including this addendum will be		483,121.00