то:	Angela Calvillo, Clerk of th	ne Board of Supervisors	
FROM:	Amanda Fried		
DATE:	March 4, 2019		
SUBJECT:	Accept and Expend Resolu	ution for Subject Grant	
GRANT TITLE:	San Francisco Internationa	al Airport Workers Fund	
Attached please find the original* and 1 copy of each of the following:			
X Proposed grant resolution; original* signed by Department, Mayor, Controller			
X Grant informati	nt information form, including disability checklist		
X Grant budget			
X_ Grant application			
X Grant award letter from funding agency			
X Ethics Form 126 (if applicable)			
Contracts, Leases/Agreements (if applicable)			
Other (Explain):			
Special Timeline Requirements:			
Departmental representative to receive a copy of the adopted resolution:			
Name: Amano	da Fried	Phone: 415-554-0889	
teroffice Mail Address:			
Certified copy requir	red Yes 🗆	No ⊠	