

File No. 110174

Committee Item No. 9
Board Item No. _____

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Rules

Date 3/3/11

Board of Supervisors Meeting

Date _____

Cmte Board

- | | | |
|-------------------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Motion |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Resolution |
| <input type="checkbox"/> | <input type="checkbox"/> | Ordinance |
| <input type="checkbox"/> | <input type="checkbox"/> | Legislative Digest |
| <input type="checkbox"/> | <input type="checkbox"/> | Budget Analyst Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Legislative Analyst Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Youth Commission Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Introduction Form (for hearings) |
| <input type="checkbox"/> | <input type="checkbox"/> | Department/Agency Cover Letter and/or Report |
| <input type="checkbox"/> | <input type="checkbox"/> | MOU |
| <input type="checkbox"/> | <input type="checkbox"/> | Grant Information Form |
| <input type="checkbox"/> | <input type="checkbox"/> | Grant Budget |
| <input type="checkbox"/> | <input type="checkbox"/> | Subcontract Budget |
| <input type="checkbox"/> | <input type="checkbox"/> | Contract/Agreement |
| <input type="checkbox"/> | <input type="checkbox"/> | Award Letter |
| <input type="checkbox"/> | <input type="checkbox"/> | Application |
| <input type="checkbox"/> | <input type="checkbox"/> | Public Correspondence |

OTHER

(Use back side if additional space is needed)

<input type="checkbox"/>	<input type="checkbox"/>	_____
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<input type="checkbox"/>	<input type="checkbox"/>	_____

Completed by: Linda Wong

Date 2/25/11

Completed by: _____

Date _____

An asterisked item represents the cover sheet to a document that exceeds 25 pages. The complete document is in the file.

1 [Settlement of Claim – Homeless Prenatal Program, Inc. - \$135,246.65]

2
3 **Resolution approving the settlement of the unlitigated claim filed by Homeless Prenatal**
4 **Program, Inc. against the City and County of San Francisco for \$135,246.65; claim was**
5 **filed on September 23, 2010.**

6
7 WHEREAS, Homeless Prenatal Program, Inc. has filed a claim on September 23, 2010
8 against the City and County of San Francisco for a property tax refund; and

9 WHEREAS, The Office of the Assessor-Recorder of the City and County of
10 San Francisco has recommended settlement of said claim by payment of \$135,246.65; and

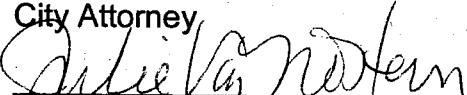
11 **RESOLVED**, That pursuant to Section 6.15-1 of the San Francisco Business and Tax
12 Regulations Code, settlement and compromise of said claim by payment of \$135,246.65 is
13 hereby approved.

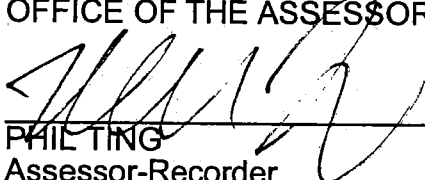
14
15 **APPROVED:**

RECOMMENDED:

16
17 DENNIS J. HERRERA
City Attorney

OFFICE OF THE ASSESSOR-RECORDER

18 
19 JULIE VAN NOSTERN
Chief Tax Attorney


PHIL TING
Assessor-Recorder

20 **FUNDS AVAILABLE:**

21 
22 BEN ROSENFELD
23 Controller