

**TO:** Angela Calvillo, Clerk of the Board of Supervisors  
**FROM:** Lorna Garrido, Grants and Contracts Manager  
**DATE:** March 12, 2026  
**SUBJECT:** Accept and Expend Resolution for Subject Gift  
**GIFT TITLE:** The Chris Larsen Fund

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Attached please find the following documents:

Proposed gift resolution; original\* signed by Department, Mayor, Controller

Gift information form, including disability checklist

Gift budget

Gift application

Gift award letter from funding agency

Ethics Form 126 (if applicable)

Contracts, Leases/Agreements (if applicable)

Other (Explain): program narrative

**Special Timeline Requirements:**  
none.

**Departmental representative to receive a copy of the adopted resolution:**

Name: Lorna Garrido

Phone: (628) 652-4035

Interoffice Mail Address: DAT, 350 Rhode Island Street, North Building, Suite 400N

**Certified copy required Yes**

No

(Note: certified copies have the seal of the City/County affixed and are occasionally required by funding agencies. In most cases ordinary copies without the seal are sufficient).