

**TO:** Angela Calvillo, Clerk of the Board of Supervisors  
**FROM:** Katharine Hobin Porter, Managing Attorney  
Office of the City Attorney  
**DATE:** September 21, 2024  
**SUBJECT:** Accept and Expend Resolution for Grant  
**GRANT TITLE:** Workers' Rights Enforcement Grant Program

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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 information form, including disability checklist
- X Grant budget
- X Grant application
- X Grant award letter from funding agency
- N/A Ethics Form 126 (if applicable)
- X Contracts, Leases/Agreements (if applicable)

\_\_\_ Other (Explain):

**Special Timeline Requirements:** N/A

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

Name: Matthew Goldberg

Phone: 415-418-4000

Interoffice Mail Address: City Hall, Room 234

Certified copy required Yes

No X

(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).

Updated August 7, 2014