## **Department of Public Health**

## City and County of San Francisco



Daniel Lurie Mayor Daniel Tsai Director of Health

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TO:	Angela Calvillo, Clerk of th	le Board of Supervisors	
FROM:	Daniel Tsai Director of Health		
DATE:	Monday, March 24, 2025		
SUBJECT:	Accept & Expend Resolution for State Grants		
TITLE:	FY 2025-2026 Recurring State Grants		
Attached please find the original and 1 copy of each of the following:			
	Proposed grant resolution, original signed by Department		
Grant information form, including disability checklist ( <i>Not required, these are recurring grants which are included in the FY 2025-2026 budget.</i> )			
Other (Exp	Other (Explain): List of State grants (Attachment A)		
Special Timeline Requirements:			
Departmental representative to receive a copy of the adopted resolution:			
Name: Gregory W	/ong	Phone: 554-2521	
Interoffice Mail Address: 101 Grove, Ste. 110			
Certified copy req	uired Yes 🗌	No 🖂	