



**Daniel L. Lurie**  
**Mayor**

**Daniel Tsai**  
**Director of Health**

**TO:** Angela Calvillo, Clerk of the Board of Supervisors

**FROM:** Dr. Grant Colfax  
Director of Health

**DATE:** 12/3/2025

**SUBJECT:** Grant Application

**GRANT TITLE:** Ryan White HIV/AIDS Program Part A HIV Emergency Relief  
Grant Program - \$15,552,315

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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
- ☒ Budget and Budget Justification
- ☐ Grant application
- ☐ Agreement / Award Letter
- ☒ Other (Explain):
  - 1. Board Cover Memo
  - 2. Performance Narrative
  - 3. Organization Structure
  - 4. Board Email
  - 5. Board Letter (Word)
  - 5. Board Letter (PDF)
  - 6. Board Resolution (Word)
  - 6. Board Resolution (PDF)
  - 7. SF-424a Budget Summary
  - 8. Planning Council Roster
  - 9. Budget Narrative
  - 10. Maintenance of Effort
  - 11. Mayor's Office Cover Memo
  - 12. Allocations Report
  - 13. NCC Progress Report
  - 14. Core Medical Service Waiver
  - 15. HIV Community Planning Council Letter
  - 16. Agreements Compliance
  - 17. Indirect Cost Rate

18. HIV Care Continuum

**Special Timeline Requirements:**

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

Name: Gregory Wong (greg.wong@sfdph.org) Phone: 554-2521

Interoffice Mail Address: Dept. of Public Health, 101 Grove St # 108

Certified copy required Yes ☐

No ☒