

TO: Angela Calvillo, Clerk of the Board of Supervisors

FROM: Janica Li

DATE: January 2, 2024

SUBJECT: Accept and Expend Resolution for Subject Grant

GRANT TITLE: PDR CARE Court

Attached please find the original* and 1 copy of each of the following:

Proposed grant resolution; original* signed by Department, Mayor, Controller

Grant information form, including disability checklist

Grant budget

Grant application

Grant award letter from funding agency

Ethics Form 126 (if applicable)

Contracts, Leases/Agreements (if applicable)

Other (Explain):

Special Timeline Requirements:

Departmental representative to receive a copy of the adopted resolution:

Name: Janica Li

Phone: (415) 553-1677

Interoffice Mail Address: 555 7th Street, San Francisco, CA 94103

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).

Updated August 7, 2014