TO:	Angela Calvillo, Clerk of the Board of Supervisors	
FROM:	Carmen Chu, City Administrator	
DATE:	February 7, 2024	
SUBJECT:	Accept and Expend Resolution for Subject Grant	
GRANT TITLE:	Governor's Office of Business Cannabis Equity Grants Progra	
Attached please fin	nd the original* and one copy	of each of the following:
Proposed grant	resolution; original* signed b	y Department, Mayor, Controller
Grant information	n form, including disability ch	ecklist
Grant budget		
Grant application	1	
Letter of Intent o	r grant award letter from fund	ding agency
Ethics Form 12	6 (if applicable)	
Contracts, Lease	es/Agreements (if applicable)	
Other (Explain	):	
Special Timeline I	Requirements:	
Departmental rep	resentative to receive a cop	by of the adopted resolution:
Name:Katharine Pe	etrucione, Office of the City A	Administrator
Phone: 415-554-4	851	
Interoffice Mail Add	lress: City Hall, Room 362	
Certified copy requ	ired Ves 🕅	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).