

File No. 201099

Committee Item No. 8

Board Item No. _____

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Budget & Finance Committee

Date October 21, 2020

Board of Supervisors Meeting

Date _____

Cmte Board

- | | | |
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| <input type="checkbox"/> | <input type="checkbox"/> | Motion |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Resolution |
| <input type="checkbox"/> | <input type="checkbox"/> | Ordinance |
| <input type="checkbox"/> | <input type="checkbox"/> | Legislative Digest |
| <input type="checkbox"/> | <input type="checkbox"/> | Budget and Legislative Analyst Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Youth Commission Report |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Introduction Form |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Department/Agency Cover Letter and/or Report |
| <input type="checkbox"/> | <input type="checkbox"/> | MOU |
| <input type="checkbox"/> | <input type="checkbox"/> | Grant Information Form |
| <input type="checkbox"/> | <input type="checkbox"/> | Grant Budget |
| <input type="checkbox"/> | <input type="checkbox"/> | Subcontract Budget |
| <input type="checkbox"/> | <input type="checkbox"/> | Contract/Agreement |
| <input type="checkbox"/> | <input type="checkbox"/> | Form 126 – Ethics Commission |
| <input type="checkbox"/> | <input type="checkbox"/> | Award Letter |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Application |
| <input type="checkbox"/> | <input type="checkbox"/> | Public Correspondence |

OTHER (Use back side if additional space is needed)

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Completed by: Linda Wong

Date October 15, 2020

Completed by: Linda Wong

Date _____

1 [Apply for Funds Allocation - California Department of Housing and Community Development -
2 Child Welfare Agency Allocation - Transitional Housing Program - Not to Exceed \$459,200]

3 **Resolution authorizing the Human Services Agency to apply for and accept a County**
4 **Child Welfare Agency Allocation for an amount not to exceed \$459,200 from the**
5 **California Department of Housing and Community Development under the Transitional**
6 **Housing Program to help young adults secure and maintain housing.**

7
8 WHEREAS, The State of California, Department of Housing and Community
9 Development (“Department”) issued an Allocation Acceptance form, dated July 27, 2020
10 under the Transitional Housing Program (“THP” or “Program”) for \$8,000,000 authorized by
11 item 2240-102-0001 of section 2.00 of the Budget Act of 2020 (Chapter 6 of the Statutes of
12 2020) and Chapter 11.7 (commencing with Section 50807) of part 2 of Division 31 of the
13 Health and Safety Code; and

14 WHEREAS, The Allocation Acceptance form relates to the availability of Transitional
15 Housing Program funds for the purpose of housing stability to help young adults 18 to 25
16 years old secure and maintain housing, with priority given to young adults formerly in the
17 foster care or probation systems; and

18 WHEREAS, City and County of San Francisco was included in the Allocation
19 Acceptance form dated July 27, 2020 as a county child welfare agency eligible to apply for
20 funding; and

21 WHEREAS, The total allocation of \$459,200 shall be distributed to county child welfare
22 services agencies based on each county's percentage of the total statewide number of young
23 adults aged 18 to 25 years in foster care; now, therefore, be it

24 RESOLVED, That the Human Services Agency is hereby authorized to apply for and
25 accept the Transitional Housing Program Allocation award, as detailed in the Allocation

1 Acceptance form, up to the amount authorized by the Allocation Acceptance form and
2 applicable state law; and, be it

3 FURTHER RESOLVED, That the Executive Director of the Human Services Agency is
4 hereby authorized to act on behalf of the City and County of San Francisco in connection with
5 the Transitional Housing Program Allocation award, and to enter into, execute, and deliver
6 any and all documents required or deemed necessary or appropriate to be awarded the
7 Transitional Housing Program Allocation award, and all amendments thereto; and, be it

8 FURTHER RESOLVED, That the Human Services Agency will use the Transitional
9 Housing Program award funds in accordance with the Allocation Acceptance form, other
10 applicable rules and laws, and the Transitional Housing Program requirements.

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APPROVED:

_____ /s/

Trent Rhorer
Executive Director, Human Services Agency

Transitional Housing Program (THP)

Round 2 Allocation Acceptance Form



**Gavin Newsom, Governor
State of California**

**Lourdes M. Castro Ramírez, Secretary
Business, Consumer Services and Housing Agency**

**Gustavo F. Velasquez, Director
California Department of Housing and Community Development**

**2020 West El Camino Avenue, Suite 150
Sacramento, CA 95833
Phone: (916) 263-2771
Email: THP@hcd.ca.gov**

July 2020

Transitional Housing Program (THP) Allocation Acceptance Round 2										Rev. 7/27/20											
County Allocation (select Applicant County in row 7 below):										\$459,200											
<p>Pursuant to item 2240-102-0001 of Section 2.00 of the Budget Act of 2020 (Chapter 6 of the Statutes of 2020) and Chapter 11.7 (commencing with Section 50807) of Part 2 of Division 31 of the Health and Safety Code (HSC), the Department of Housing and Community Development (HCD) shall allocate \$8 million in funding to counties for the purpose of housing stability to help young adults 18 to 25 years secure and maintain housing, with priority given to young adults formerly in the foster care or probation systems.</p>																					
Allocation Applicant																					
Allocation Applicant is a County Child Welfare Agency																					
<p>Pursuant to Section 50807(b) of the HSC, HCD consulted with the Department of Social Services, the Department of Finance, and the County Welfare Directors Association to develop a formula allocation schedule for the purpose of distributing these funds to counties. The allocation is based on each county's percentage of the total statewide number of young adults aged 18 to 25 years in foster care. The allocation excludes Alpine and Sierra county because their calculation did not demonstrate a need for young adults aged 18 to 25</p>																					
Applicant County		San Francisco County																			
Legal name of Applicant as stated on resolution:				City and County of San Francisco																	
Address		City and County of San Francisco Human Services Agency PO Box 7988				City		San Francisco		State		CA		Zip		94120					
Auth Rep Name		Trent Rhorer		Title		Executive Director		Auth Rep Email		trent.rhorer@sfgov.org		Phone		(415)557-6541							
Contact Name		Joan Miller		Title		Deputy Director, Family and Children Services		Email		joan.miller@sfgov.org		Phone		(415) 558-2660							
Address		City and County of San Francisco Human Services Agency PO Box 7988				City		San Francisco		State		CA		Zip		94120					
Federal Tax ID Number (FEIN)		94-6000417																			
Administrative Fiscal Representative																					
Legal Name		Heather Davis				Contact Name		Heather Davis		Contact Email		heather.davis@sfgov.org									
Phone		(415)557-5542		Address		City and County of San Francisco Human Services Agency PO Box 7988				City		San Francisco		State		CA		Zip		94120	
File Name:		App Resolution		Reference sample resolution document						Attached to email?		Yes									
File Name:		App TIN		Reference Taxpayer Identification Number (TIN) document						Attached to email?		Yes									
Use of Funds																					
<p>Funds shall be used to help young adults who are 18 to 25 years of age secure and maintain housing. Use of funds may include, but are not limited to:</p> <ol style="list-style-type: none"> 1) Identify and assist housing services for this population in your community; 2) Assist this population to secure and maintain housing (with priority given to those in the state's foster care or probation system); 3) Improve coordination of services and linkages to community resources within the child welfare system and the Homeless Continuum of Care; and 4) Provide engagement in outreach and targeting to serve those with the most severe needs. 																					
Expenditure of Funds																					
<p>Any grant funds remaining unexpended as of June 30, 2023, must be returned to the State. Checks shall be payable to the Department of Housing and Community Development and mailed to 2020 West El Camino Ave. Room 300, no later than July 31, 2023 and must reference the Contract Number.</p>																					
Allocation Acceptance Requirements																					
<p>In order to accept and receive an allocation, applicants must submit the following: Signed Allocation Acceptance form, Signed Resolution, and TIN Form. <i>CD will only accept applications electronically via email no later than 5:00 p.m. on:</i></p> <p style="text-align: center;">Thursday, November 12, 2020</p> <p style="text-align: center;"><i>HCD will only accept applications electronically at the following email address:</i></p> <p style="text-align: center;">THP@hcd.ca.gov</p>																					
Reporting Requirements																					
<p>Applicant acknowledges and agrees to submit an annual report to the Department for the three years following distribution of TAY Program funds addressing the following:</p> <ol style="list-style-type: none"> 1) How many people were served? 2) What were the funds used for? 3) Who were the housing navigator(s)? 4) How many people served were in foster care? 5) How many people served were in probation system? 																					
Certification																					
<p>On behalf of the entity identified in the signature block below, I certify that:</p> <p>The information, statements and attachments included in this Allocation Acceptance form are, to the best of my knowledge and belief, true and correct. I possess the legal authority to submit this Allocation Acceptance form on behalf of the entity identified above. In addition, I acknowledge that all information in this application and attachments is public, and may be disclosed by the State.</p>																					
		Human Services Agency, Executive Director																			
Printed Name		Title of Signatory				Signature				Date											
Name:		Trent Rhorer				Phone Number:		(415) 557-6541													
Address:		City and County of San Francisco Human Services Agency PO Box 7988				City:		San Francisco		State:		CA		Zip:		94120					

Subject: FW: Invitation to accept allocation for the Round 2 Transitional Housing Program (THP)
Attachments: Transitional Housing Program Acceptance 072720.xlsx; THP R2 Resolution 072720.docx; Cover Letter_Apply and Accept for Transitional Housing and Housing Navigators Programs_Mar 20.pdf; Transitional Housing Program Apply and Accept Resolution (Mar 2020 signed).pdf

From: Tran-Houangvilay, Stephanie@HCD <Stephanie.Tran-Houangvilay@hcd.ca.gov> **On Behalf Of** THP@HCD
Sent: Monday, July 27, 2020 2:36 PM
Subject: Invitation to accept allocation for the Round 2 Transitional Housing Program (THP)

This message is from outside the City email system. Do not open links or attachments from untrusted sources.

Good Afternoon,

Pursuant to item 2240-102-0001 of Section 2.00 of the Budget Act of 2020 (Chapter 6 of the Statutes of 2020) and Chapter 11.7 (commencing with Section 50807) of Part 2 of Division 31 of the Health and Safety Code (HSC), the Department of Housing and Community Development (HCD) shall allocate \$8 million in funding of the Transitional Housing Program (THP) to counties for the purpose of housing stability to help young adults 18 to 25 years secure and maintain housing, with priority given to young adults formerly in the foster care or probation systems.

In agreement with the Department of Social Services, the Department of Finance, and the County Welfare Directors Association, the allocation for Round 2 of the Transitional Housing Program will remain the same as Round 1. As with Round 1, this allocation excludes Alpine and Sierra because their calculation did not demonstrate a need for young adults aged 18 to 25.

In order to accept and receive an allocation for Round 2, applicants must submit the following: **Signed Allocation Acceptance form, Signed Resolution, and a signed GovTIN form.** HCD will only accept completed applications and relevant documentation via email to THP@hcd.ca.gov no later than **5:00 p.m. on Thursday, November 12, 2020**. Please find attached the THP Allocation Acceptance form, Resolution template and GOVTIN form. These forms can also be found on the [THP](#) webpage.

The anticipated timeline is as follows:

July	Release of the Invitation to accept Round 2 Transitional Housing Program Allocation via email
------	---

November 12	Allocation Acceptance form due
December - February	Award / Standard Agreement Execution

Please feel free to reach out to us with questions at THP@hcd.ca.gov.

Stay safe and healthy!

CCSF-HSA - All outbound HSA email is automatically scanned for PII and PHI by Zix Email Encryption

Transitional Housing Program (THP) Allocation Acceptance Round 2										Rev. 7/27/20					
County Allocation (select Applicant County in row 7 below):															
<p>Pursuant to item 2240-102-0001 of Section 2.00 of the Budget Act of 2020 (Chapter 6 of the Statutes of 2020) and Chapter 11.7 (commencing with Section 50807) of Part 2 of Division 31 of the Health and Safety Code (HSC), the Department of Housing and Community Development (HCD) shall allocate \$8 million in funding to counties for the purpose of housing stability to help young adults 18 to 25 years secure and maintain housing, with priority given to young adults formerly in the foster care or probation systems.</p>															
Allocation Applicant															
Allocation Applicant is a County Child Welfare Agency															
<p>Pursuant to Section 50807(b) of the HSC, HCD consulted with the Department of Social Services, the Department of Finance, and the County Welfare Directors Association to develop a formula allocation schedule for the purpose of distributing these funds to counties. The allocation is based on each county's percentage of the total statewide number of young adults aged 18 to 25 years in foster care. The allocation excludes Alpine and Sierra county because their calculation did not demonstrate a need for young adults aged 18 to 25</p>															
Applicant County															
Legal name of Applicant as stated on resolution:															
Address															
City															
State															
Zip															
Auth Rep Name															
Title															
Auth Rep Email															
Phone															
Contact Name															
Title															
Email															
dgf															
Phone															
Address															
City															
State															
Zip															
Federal Tax ID Number (FEIN)															
Administrative Fiscal Representative															
Legal Name															
Contact Name															
Contact Email															
Phone															
Address															
City															
dgf															
State															
Zip															
File Name: App Resolution															
Reference sample resolution document															
Attached to email?															
File Name: App TIN															
Reference Taxpayer Identification Number (TIN) document															
Attached to email?															
Use of Funds															
<p>Funds shall be used to help young adults who are 18 to 25 years of age secure and maintain housing. Use of funds may include, but are not limited to:</p> <ol style="list-style-type: none"> 1) Identify and assist housing services for this population in your community; 2) Assist this population to secure and maintain housing (with priority given to those in the state's foster care or probation system); 3) Improve coordination of services and linkages to community resources within the child welfare system and the Homeless Continuum of Care; and 4) Provide engagement in outreach and targeting to serve those with the most severe needs. 															
Expenditure of Funds															
<p>Any grant funds remaining unexpended as of June 30, 2023, must be returned to the State. Checks shall be payable to the Department of Housing and Community Development and mailed to 2020 West El Camino Ave. Room 300, no later than July 31, 2023 and must reference the Contract Number.</p>															
Allocation Acceptance Requirements															
<p>In order to accept and receive an allocation, applicants must submit the following: Signed Allocation Acceptance form, Signed Resolution, and TIN Form#CD will only accept applications electronically via email no later than 5:00 p.m. on:</p> <p style="text-align: center;">Thursday, November 12, 2020</p> <p style="text-align: center;">HCD will only accept applications electronically at the following email address:</p> <p style="text-align: center;">THP@hcd.ca.gov</p>															
Reporting Requirements															
<p>Applicant acknowledges and agrees to submit an annual report to the Department for the three years following distribution of TAY Program funds addressing the following:</p> <ol style="list-style-type: none"> 1) How many people were served? 2) What were the funds used for? 3) Who were the housing navigator(s)? 4) How many people served were in foster care? 5) How many people served were in probation system? 															
Certification															
<p>On behalf of the entity identified in the signature block below, I certify that:</p> <p>The information, statements and attachments included in this Allocation Acceptance form are, to the best of my knowledge and belief, true and correct. I possess the legal authority to submit this Allocation Acceptance form on behalf of the entity identified above. In addition, I acknowledge that all information in this application and attachments is public, and may be disclosed by the State.</p>															
Printed Name				Title of Signatory				Signature				Date			
Name:				Phone Number:				City:				State:			
Address:				City:				State:				Zip:			

Introduction Form

By a Member of the Board of Supervisors or Mayor

Time stamp
or meeting date

I hereby submit the following item for introduction (select only one):

- 1. For reference to Committee. (An Ordinance, Resolution, Motion or Charter Amendment).
- 2. Request for next printed agenda Without Reference to Committee.
- 3. Request for hearing on a subject matter at Committee.
- 4. Request for letter beginning : "Supervisor inquiries"
- 5. City Attorney Request.
- 6. Call File No. from Committee.
- 7. Budget Analyst request (attached written motion).
- 8. Substitute Legislation File No.
- 9. Reactivate File No.
- 10. Topic submitted for Mayoral Appearance before the BOS on

Please check the appropriate boxes. The proposed legislation should be forwarded to the following:

- Small Business Commission
- Youth Commission
- Ethics Commission
- Planning Commission
- Building Inspection Commission

Note: For the Imperative Agenda (a resolution not on the printed agenda), use the Imperative Form.

Sponsor(s):

Subject:

The text is listed:

Signature of Sponsoring Supervisor:

For Clerk's Use Only

From: [Smith, Susie \(HSA\)](#)
To: [BOS Legislation, \(BOS\)](#); [Low, Jen \(BOS\)](#)
Cc: [Hsieh, Frances \(BOS\)](#); [Vejby, Caitlin \(BOS\)](#); [Yee, Norman \(BOS\)](#); [LaBarre, Elizabeth \(HSA\)](#); [Gendelman, Johanna \(HSA\)](#); [RIES, DAVID \(CAT\)](#)
Subject: RE: Yee - Resolution - Apply for Funds Allocation – Child Welfare Agency Allocation – California Department of Housing and Community Development – Transitional Housing Program
Date: Thursday, September 24, 2020 10:02:13 AM
Attachments: [Round 2 Transitional Housing Program Acceptance 072720.xlsx](#)
[image001.png](#)
[201099.docx](#)
[Materials for Round 2 Grant-Resolution-Information-Form07_2011_Transitional_Housing_Program_\(HSA_Sept_2020\).pdf](#)

Good morning, Jocelyn.

The State Department of Housing and Community Development requires a Board resolution for permission to apply for funds but not a separate resolution to accept the funds; therefore, I listed the total statewide allocation, \$8,000,000; however, the Round 2 Transitional Housing Program Acceptance excel file lists the San Francisco allocation amount of \$459,200 so I amended the resolution accordingly.

Attached please find:

- Revised resolution
- Email from State Department of Housing and Community Development announcing the invitation to apply for this funding
- Allocation acceptance form (excel file)

Please let me know if you need anything further.

Thank you,

Susie Smith
Deputy Director, Policy and Planning
Human Services Agency, City and County of San Francisco
Cell: (415) 307-3291

From: BOS Legislation, (BOS) <bos.legislation@sfgov.org>
Sent: Wednesday, September 23, 2020 4:34 PM
To: BOS Legislation, (BOS) <bos.legislation@sfgov.org>; Low, Jen (BOS) <jen.low@sfgov.org>
Cc: Hsieh, Frances (BOS) <frances.hsieh@sfgov.org>; Vejby, Caitlin (BOS) <caitlin.vejby@sfgov.org>; Yee, Norman (BOS) <norman.yee@sfgov.org>; LaBarre, Elizabeth (HSA) <elizabeth.labarre@sfgov.org>; Gendelman, Johanna (HSA) <johanna.gendelman@sfgov.org>; RIES, DAVID (CAT) <David.Ries@sfcityatty.org>; Smith, Susie (HSA) <susie.smith@sfgov.org>
Subject: RE: Yee - Resolution - Apply for Funds Allocation – Child Welfare Agency Allocation – California Department of Housing and Community Development – Transitional Housing Program

Please disregard the draft that was sent. The \$8,000 amount listed is incorrect. Can you please

confirm what the allocation amount would be, as we would like to add the amount to the title? We would still like request the documents that would reflect that confirmed allocation amount. Thank you.

Best regards.

Jocelyn Wong

San Francisco Board of Supervisors

1 Dr. Carlton B. Goodlett Place, Room 244

San Francisco, CA 94102

T: 415.554.7702 | F: 415.554.5163

jocelyn.wong@sfgov.org | www.sfbos.org

(VIRTUAL APPOINTMENTS) To schedule a “virtual” meeting with me (on Microsoft Teams), please ask and I can answer your questions in real time.

Due to the current COVID-19 health emergency and the Shelter in Place Order, the Office of the Clerk of the Board is working remotely while providing complete access to the legislative process and our services



Click [here](#) to complete a Board of Supervisors Customer Service Satisfaction form

The [Legislative Research Center](#) provides 24-hour access to Board of Supervisors legislation, and archived matters since August 1998.

***Disclosures:** Personal information that is provided in communications to the Board of Supervisors is subject to disclosure under the California Public Records Act and the San Francisco Sunshine Ordinance. Personal information provided will not be redacted. Members of the public are not required to provide personal identifying information when they communicate with the Board of Supervisors and its committees. All written or oral communications that members of the public submit to the Clerk's Office regarding pending legislation or hearings will be made available to all members of the public for inspection and copying. The Clerk's Office does not redact any information from these submissions. This means that personal information—including names, phone numbers, addresses and similar information that a member of the public elects to submit to the Board and its committees—may appear on the Board of Supervisors' website or in other public documents that members of the public may inspect or copy.*

From: BOS Legislation, (BOS) <bos.legislation@sfgov.org>

Sent: Wednesday, September 23, 2020 4:29 PM

To: Low, Jen (BOS) <jen.low@sfgov.org>; BOS Legislation, (BOS) <bos.legislation@sfgov.org>

Cc: Hsieh, Frances (BOS) <frances.hsieh@sfgov.org>; Vejby, Caitlin (BOS) <caitlin.vejby@sfgov.org>;

Yee, Norman (BOS) <norman.yee@sfgov.org>; LaBarre, Elizabeth (HSA)

<elizabeth.labarre@sfgov.org>; Gendelman, Johanna (HSA) <johanna.gendelman@sfgov.org>; RIES,

DAVID (CAT) <David.Ries@sfcityatty.org>; Smith, Susie (HSA) <susie.smith@sfgov.org>

Subject: RE: Yee - Resolution - Apply for Funds Allocation – Child Welfare Agency Allocation – California Department of Housing and Community Development – Transitional Housing Program

Greetings,

Please see attached for proof of clerical edits, indicating the amount of up to \$8,000 in the short and long titles. Kindly review and confirm if the changes are acceptable.

We will need a copy of the department's most recent draft of the Allocation Acceptance form as referenced in the legislation, as well as any document that reflects the \$8,000 allocation, and any additional supporting documents relevant for applying for the allocation (program description by the awarding body). Please provide those documents for inclusion to the file by noon, tomorrow. Thank you.

Best regards,

Jocelyn Wong

San Francisco Board of Supervisors

1 Dr. Carlton B. Goodlett Place, Room 244

San Francisco, CA 94102

T: 415.554.7702 | F: 415.554.5163

jocelyn.wong@sfgov.org | www.sfbos.org

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From: Low, Jen (BOS) <jen.low@sfgov.org>

Sent: Tuesday, September 22, 2020 5:25 PM

To: BOS Legislation, (BOS) <bos.legislation@sfgov.org>

Cc: Hsieh, Frances (BOS) <frances.hsieh@sfgov.org>; Vejby, Caitlin (BOS) <caitlin.vejby@sfgov.org>;

Yee, Norman (BOS) <norman.yee@sfgov.org>; LaBarre, Elizabeth (HSA)

<elizabeth.labarre@sfgov.org>; Gendelman, Johanna (HSA) <johanna.gendelman@sfgov.org>; RIES,

DAVID (CAT) <David.Ries@sfcityattv.org>; Smith, Susie (HSA) <susie.smith@sfgov.org>

Subject: Yee - Resolution - Apply for Funds Allocation – Child Welfare Agency Allocation – California Department of Housing and Community Development – Transitional Housing Program

Importance: High

Dear Clerk Staff,

Please find attached **Yee - Resolution - Apply for Funds Allocation – Child Welfare Agency Allocation – California Department of Housing and Community Development – Transitional Housing Program**. The application is included for the file. The staff at Human Services Agency are cc'ed if you need any further clarification on the materials provided.

Thank you,

Jen