

TO: Angela Calvillo, Clerk of the Board of Supervisors
FROM: Andrew Holcomb, EMS Director, Dept of Emergency Management
DATE: March 23, 2024
SUBJECT: Accept and Expend Resolution for Subject Grant

GRANT TITLE:

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: Andrew Holcomb

Phone: 415-244-4771

Interoffice Mail Address: 333 Valencia St, Suite 210, 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).