

TO: Angela Calvillo, Clerk of the Board of Supervisors
FROM: Lorna Garrido, Grants and Contracts Manager
DATE: May 21, 2019
SUBJECT: Accept and Expend Resolution for Subject Grant
GRANT TITLE: Criminal Restitution Compact

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

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

X Grant information form, including disability checklist

X Grant budget

n/a Grant application

X Grant award letter from funding agency

n/a Ethics Form 126 (if applicable)

n/a Contracts, Leases/Agreements (if applicable)

n/a Other (Explain):

Special Timeline Requirements:

Please schedule for the earliest available date.

Departmental representative to receive a copy of the adopted resolution:

Name: Lorna Garrido

Phone: 415-553-9258

Interoffice Mail Address: DAT, 850 Bryant Street, Room 322

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).