

**TO:** Angela Calvillo, Clerk of the Board of Supervisors  
**FROM:** The Department of Children Youth and Their Families  
**DATE:** July 14, 2022  
**SUBJECT:** Accept and Expend Resolution for Subject Grant  
**GRANT TITLE:** Crankstart Summer Together Grant

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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: Sherrice Dorsey

Phone: 628-652-7146

Interoffice Mail Address: **DCYF**

**1390 Market Street, Suite 900, 9<sup>th</sup> floor, SF CA  
94102**

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).