

TO: Angela Calvillo, Clerk of the Board of Supervisors

FROM: Lisa Pagan, Director of Policy and Planning,
Office of Economic and Workforce Development

DATE: June 2, 2020

SUBJECT: Accept and Expend Resolution

GRANT TITLE: Dislocated Worker Emergency Additional Assistance

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

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

X Grant information form, including disability checklist

X Grant budget

X Grant application

X Letter of Intent or 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:

COVID-19 Emergency Funding. Grant term started 05/01/2020.

Departmental representative to receive a copy of the adopted ordinance:

Name: Lisa Pagan

Phone/Email: lisa.pagan@sfgov.org

Interoffice Mail Address: 1 Dr. Carlton B. Goodlett Pl., City Hall, Room 448, San Francisco, 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).