TO:	Angela Calvillo, Clerk of the Board of Supervisors
FROM:	Lisa Pagan, Director of Policy and Planning, Office of Economic and Workforce Development
DATE:	October 5, 2020
SUBJECT:	Accept and Expend Resolution
GRANT TITLE:	SlingShot 3.0 Regional Plan Implementation
Attached please find the original* and one copy of each of the following:	
\underline{X} Proposed grant resolution; original* signed by Department, Mayor, Controller	
X Grant information form, including disability checklist	
X_ Grant budget	
X Grant application	
\underline{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)	
X Other (Explain): Notice of Funds Availability	
Special Timeline Requirements: None	
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 \(\sum \) No \(\sum \) (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).	