

File Number: _____
(Provided by Clerk of Board of Supervisors)

Grant Resolution Information Form
(Effective July 2011)

Purpose: Accompanies proposed Board of Supervisors resolutions authorizing a Department to accept and expend grant funds.

The following describes the grant referred to in the accompanying resolution:

1. Grant Title: **JPMorgan Chase StopScamsSF Program Grant**
2. Department: **Office of the Treasurer & Tax Collector**
3. Contact Person: **Eric Manke** Telephone: **(415) 350-0700**
4. Grant Approval Status (check one):

Approved by funding agency Not yet approved

5. Amount of Grant Funding Approved or Applied for: **\$3,000,000**

6. a. Matching Funds Required: **\$0**
- b. Source(s) of matching funds (if applicable): **N/A**

7. a. Grant Source Agency: **JPMorgan Chase Bank, N.A.**
- b. Grant Pass-Through Agency (if applicable): **N/A**

8. Proposed Grant Project Summary:
StopScamsSF is a three-year initiative to prevent financial fraud and scams targeting vulnerable San Francisco residents. Grant activities include multilingual scam-prevention campaigns, verified scam alerts, development of the 311 Payment Verification Directory, integration of scam-screening into financial counseling, creation of citywide scam-proofing standards, and the development of a StopScams Playbook to support replication in other jurisdictions.

9. Grant Project Schedule, as allowed in approval documents, or as proposed:

Start-Date: **December 15, 2025** End-Date: **December 14, 2028**

10. a. Amount budgeted for contractual services: **\$1,337,294**
- b. Will contractual services be put out to bid? **Yes**
- c. If so, will contract services help to further the goals of the Department's Local Business Enterprise (LBE) requirements? **Yes**
- d. Is this likely to be a one-time or ongoing request for contracting out? **One-time**

11. a. Does the budget include indirect costs?
 Yes No
- b. 1. If yes, how much? **\$247,706**
- b. 2. How was the amount calculated? **Per approved indirect costs in the grant agreement.**

- c. 1. If no, why are indirect costs not included?
 Not allowed by granting agency To maximize use of grant funds on direct services
 Other (please explain):
- c. 2. If no indirect costs are included, what would have been the indirect costs?

14. Any other significant grant requirements or comments: No

****Disability Access Checklist****

15. This Grant is intended for activities at (check all that apply):

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Existing Site(s) | <input type="checkbox"/> Existing Structure(s) | <input checked="" type="checkbox"/> Existing Program(s) or Service(s) |
| <input type="checkbox"/> Rehabilitated Site(s) | <input type="checkbox"/> Rehabilitated Structure(s) | <input type="checkbox"/> New Program(s) or Service(s) |
| <input type="checkbox"/> New Site(s) | <input type="checkbox"/> New Structure(s) | |

16. The Departmental ADA Coordinator or the Mayor's Office on Disability have reviewed the proposal and concluded that the project as proposed will be in compliance with the Americans with Disabilities Act and all other Federal, State and local access laws and regulations and will allow the full inclusion of persons with disabilities, or will require unreasonable hardship exceptions, as described in the comments section:

Comments:

Departmental ADA Coordinator or Mayor's Office of Disability Reviewer:

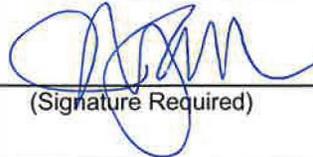
Adrienne Yan

(Name)

Taxpayer Assistance Manager

(Title)

Date Reviewed: 1/7/26



(Signature Required)

Overall Department Head or Designee Approval:

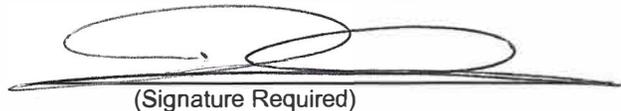
José Cisneros

(Name)

Treasurer

(Title)

Date Reviewed: 1/7/26



(Signature Required)