## **Department of Public Health**

## City and County of San Francisco



London N. Breed Mayor

TO:		Angela Calvillo, Clerk of the Board of Supervisors
FROM	<b>1</b> 1:	Dr. Grant Colfax Director of Health
DATE:		11/2/2025
SUBJECT:		Grant Accept and Expend
GRAN	NT TITLE:	High-Impact HIV Prevention and Surveillance Programs for Health Departments - \$12,756,614
Attached please find the original and 1 copy of each of the following:		
	Proposed gr	ant resolution, original signed by Department
	Grant inform	nation form, including disability checklist
$\boxtimes$	Budget and Budget Justification	
	Grant application	
$\boxtimes$	Agreement / Award Letter	
	Other (Expla	ain):
Special Timeline Requirements:  Departmental representative to receive a copy of the adopted resolution:		
Name: Gregory Wong (greg.wong@sfdph.org) Phone: 554-2521		
Interoffice Mail Address: Dept. of Public Health, 101 Grove St # 108  Certified copy required Yes □ No ⊠		