

## London N. Breed Mayor

TO:		Angela Calvillo, Clerk of the Board of Supervisors		
FROM:		Dr. Grant Colfax Director of Health		
DATE:		12/2/2021		
SUBJECT:		Grant Accept and Expend		
GRANT TITLE:		Accept and Expend Grant: PS20-2010: Integrated HIV Programs for Health Departments to Support Ending the HIV Epidemic in the United States - \$3,090,288		
Attached please find the original and 1 copy of each of the following:				
$\leq$	Proposed gra	Proposed grant resolution, original signed by Department		
$\leq$	Grant information form, including disability checklist -			
$\leq$	Budget and Budget Justification			
	Grant application.			
$\leq$	Agreement / Award Letter			
	Other (Explain):			
Special Timeline Requirements:				
Departmental representative to receive a copy of the adopted resolution:				
Name: Gregory Wong (greg.wong@sfdph.org) Phone: 554-2521			Phone: 554-2521	
Interoffice Mail Address: Dept. of Public Health, 101 Grove St # 108				
Certified copy required Yes ☐ No ⊠			No 🖂	