TO:	Angela Calvillo, Clerk of the Board of Supervisors	
FROM:	Carmen Chu, City Administrator	
DATE:	April 4, 2023	
SUBJECT:	Accept and Expend Resolution for Se	ubject Grant
GRANT TITLE:	Governor's Office of Business and Economi Cannabis Equity Grants Program for Local J	-
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		
Ethics Form 126 (if applicable)		
x_Contracts, Leases/Agreements (if applicable)		
Other (Explain):		
Special Timeline Requirements:		
Departmental representative to receive a copy of the adopted ordinance:		
Name: Katharine Petrucione, Office of the City Administrator		
Phone: 415-554-4851		
Interoffice Mail Address: City Hall, Room 362		
Certified copy requi	ired 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).