CITY AND COUNTY OF SAN FRANCISCO
POLICE DEPARTMENT
HEADQUARTERS
1245 3RD Street
San Francisco, California 94158

LONDON N. BREED
MAYOR

WILLIAM SCOTT
CHIEF OF POLICE

TO: **Angela Calvillo, Clerk of the Board of Supervisors**

FROM: **San Francisco Police Department**

DATE: **June 8, 2023**

SUBJECT: **Accept and Expend Resolution for Subject Grant**

GRANT TITLE: **BSCC OFFICER WELLNESS AND MENTAL HEALTH GRANT**

Attached are the following documents:

_X_ Proposed grant resolution; original* signed by Department, Mayor, Controller
_X_ Grant information form, including disability checklist
_X_ Grant award funding distribution schedule
___ Grant application
_X_ Grant award notification from funding agency
___ Ethics Form 126 (if applicable)
___ Contracts, Leases/Agreements (if applicable)
___ Other (Explain):

Special Timeline Requirements:

Departmental representative to receive a copy of the adopted resolution:

Name: **Katie Lee / Katherine Chiu** Phone: **415-837-7211**

Interoffice Mail Address: **SFPD Fiscal, 1245 3rd Street, 6th Floor**

Certified copy required 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).