TO:	Angela Calvillo, Clerk of the Board of Supervisors		
FROM:	The Department of the Environment		
DATE:	January 7, 2015		
SUBJECT:	Accept and Expend Resolution State Grant		
GRANT TITLE:	CPUC Award for Ba	yREN	
Attached please fin	nd the original and 4 co	pies of each of the followi	ng:
X Proposed grant resolution; original signed by Department, Mayor, Controller			
X Grant information form, including disability checklist			
X Grant budget			
Grant application			
X Grant award le	etter from funding agen	су	
Other (Explain)	:		
Special Timeline F	Requirements:		
Departmental repr	resentative to receive	a copy of the adopted i	resolution:
Name: Rachel Bu	erkle	Phone:415-3	355-37g4 S
Interoffice Mail Add	lress:	,	OLLE COUP ECC
Certified copy requi	ired Yes 🗌	No X	1
(Note: certified copies h	have the seal of the City/Co	ounty affixed and are occasiona without the seal are sufficient).	ally required by: