TO:	Angela Calvillo, Clerk of the Board of Supervisors	
FROM:	Stacey Hoang, Finance Division Analyst	
DATE:	April 17, 2015	
SUBJECT:	Accept and Expend Resolution for Subject Grant	
GRANT TITLE:	Human Trafficking Advocacy Program	
Attached please find the original* and 1 copy of each of the following:		
X Proposed grant resolution; original* signed by Department, Mayor, Controller		
_X Grant information form, including disability checklist		
_X Grant budget		
_X Grant application		
_X Grant award letter from funding agency		
Ethics Form 126 (if applicable)		
Contracts, Leases/Agreements (if applicable)		
Other (Explain):		
Special Timeline Requirements: Please schedule for earliest available date.		
Departmental representative to receive a copy of the adopted resolution:		
Name: Sheila Arcel	lona Phone: 415-734-30	18
Interoffice Mail Address: Hall of Justice, Room 322		
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).		