City and County of San Francisco

Department of Public Health



Edwin M. Lee Mayor Barbara A. Garcia, MPA
Director of Health

TO: FROM: DATE: SUBJECT:		Angela Calvillo, Clerk of the Board of Supervisors Barbara A. Garcia, MPA Director of Health October 27, 2016 Grant Accept and Expend					
				GRANT TITLE:		Mid-Career Award in Patient-Oriented Substance Use Research Addressing Opioids, Chronic Pain, and HIV - \$157,235	
				Attac	hed please fi	nd the original and 2	copies of each of the following:
				\boxtimes	Proposed grant resolution, original signed by Department		
\boxtimes	Grant information form, including disability checklist -						
\boxtimes	Budget and Budget Justification						
	Grant application: Not Applicable. No application submitted.						
\boxtimes	Agreement / Award Letter						
	Other (Explain):						
Special Timeline Requirements:							
Departmental representative to receive a copy of the adopted resolution:							
Name: Richelle-Lynn Mojica Phone: 255-3555			Phone: 255-3555				
Interoffice Mail Address: Dept. of Public Health, Grants Administration for Community Programs, 1380 Howard St.							
Certified copy required Yes ☐ No ⊠			No 🖂				