TO:	Angela Calvillo, Clerk of the Board of Supervisors		
FROM:	The Department of the Environment		
DATE:	December 16, 2016		
SUBJECT:	Accept and Expend Reso	lution State Gra	nt
GRANT TITLE:	Used Motor Oil Payment I	Program OPP7	
Attached please find the original and 3 copies 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			
Grant application			
_X_ Grant award letter from funding agency			
Other (Explain):			
Special Timeline Requirements:			
Departmental representative to receive a copy of the adopted resolution:			
Name: <u>Huy Le</u>		Phone: <u>415-355-3</u>	3760
Interoffice Mail Add	ress:		
Certified copy requi	red Yes 🗌	No	Χ
(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).			