

File No. 180343

Committee Item No. 2

Board Item No. \_\_\_\_\_

### COMMITTEE/BOARD OF SUPERVISORS

#### AGENDA PACKET CONTENTS LIST

Committee: Budget & Finance Committee

Date April 26, 2018

Board of Supervisors Meeting

Date \_\_\_\_\_

#### Cmte Board

- |                                     |                          |  |
|-------------------------------------|--------------------------|--|
| <input type="checkbox"/>            | <input type="checkbox"/> | Motion                                       |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Resolution                                   |
| <input type="checkbox"/>            | <input type="checkbox"/> | Ordinance                                    |
| <input type="checkbox"/>            | <input type="checkbox"/> | Legislative Digest                           |
| <input type="checkbox"/>            | <input type="checkbox"/> | Budget and Legislative Analyst Report        |
| <input type="checkbox"/>            | <input type="checkbox"/> | Youth Commission Report                      |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Introduction Form                            |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Department/Agency Cover Letter and/or Report |
| <input type="checkbox"/>            | <input type="checkbox"/> | MOU  |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Grant Information Form                       |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Grant Budget                                 |
| <input type="checkbox"/>            | <input type="checkbox"/> | Subcontract Budget                           |
| <input type="checkbox"/>            | <input type="checkbox"/> | Contract/Agreement                           |
| <input type="checkbox"/>            | <input type="checkbox"/> | Form 126 – Ethics Commission                 |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Award Letter                                 |
| <input type="checkbox"/>            | <input type="checkbox"/> | Application                                  |
| <input type="checkbox"/>            | <input type="checkbox"/> | Public Correspondence                        |

#### OTHER (Use back side if additional space is needed)

<input type="checkbox"/>	<input type="checkbox"/>	_____
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Completed by: Linda Wong

Date April 20, 2018

Completed by: Linda Wong

Date \_\_\_\_\_

1 [Accept and Expend Grant - California Governor's Office of Emergency Services, Elder  
2 Abuse Program - \$700,000]

3 **Resolution retroactively authorizing the Office of the District Attorney to accept and**  
4 **expend a grant increase of \$300,000 for a total amount of \$700,000 from the**  
5 **California Governor's Office of Emergency Services for the Elder Abuse Program for**  
6 **the grant period July 1, 2016, through December 31, 2019.**

7  
8 WHEREAS, The initial amount awarded to the Office of the District Attorney from the  
9 California Governor's Office of Emergency Services (Cal OES) for the Elder Abuse  
10 Program was \$400,000, and which the Board of Supervisors accepted and expended  
11 through Resolution No. 460-16; and

12 WHEREAS, On October 9, 2017, Cal OES awarded an additional \$300,000 to the  
13 Office of the District Attorney for the Elder Abuse (XE) Program; and

14 WHEREAS, The total amount awarded to the Office of the District Attorney for the  
15 XE Program is \$700,000; and

16 WHEREAS, The purpose of the grant is to enhance the safety of elder victims of  
17 crime by providing direct services to victims, and bridge the gap between elder justice  
18 service providers and victim service providers; and

19 WHEREAS, The grant does not require an amendment to the Annual Salary  
20 Ordinance (ASO) Amendment; and

21 WHEREAS, The grant includes a required match of 20% of the project budget or  
22 \$175,000; the source of match is through volunteer hours and general funds; and

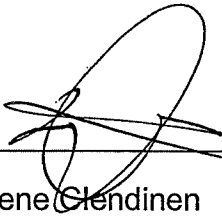
23 WHEREAS, The grant includes provision for indirect costs of \$58,212; now,  
24 therefore, be it

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RESOLVED, That the Board of Supervisors hereby authorizes the Office of the District Attorney to retroactively accept and expend, on behalf of the City and County of San Francisco, a grant from the California Governor's Office of Emergency Services for the Elder Abuse Program in the amount of \$700,000 to enhance elder services.

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Recommended:

  
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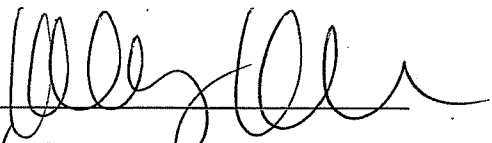
Eugene Glendinen

Chief Administrative & Financial Officer

for George Gascón

District Attorney


Approved:

  
\_\_\_\_\_

for Mark Farrell

Mayor

Approved:

  
for Ben Rosenfield  
\_\_\_\_\_

Ben Rosenfield

Controller

**Grant Resolution Information Form**  
(Effective July 2011)

Purpose: Accompanies proposed Board of Supervisors resolutions authorizing a Department to accept and expend grant funds.

The following describes the grant referred to in the accompanying resolution:

1. Grant Title: **Elder Abuse Program**
2. Department: **Office of the District Attorney**
3. Contact Person: **Lorna Garrido** Telephone: **(415) 553-9258**
4. Grant Approval Status (check one):  
 Approved by funding agency                       Not yet approved
5. Amount of Grant Funding Approved or Applied for: **\$700,000**
6. a. Matching Funds Required: **\$175,000**  
b. Source(s) of matching funds (if applicable): **Volunteer hours & staff hours paid through general funds (Project ID 10023081)**
7. a. Grant Source Agency: **U.S. Department of Justice, Office of Justice Programs**  
b. Grant Pass-Through Agency (if applicable): **California Governor's Office of Emergency Services**
8. Proposed Grant Project Summary: **To enhance the safety of elder victims of crime by providing direct services to victims and bridging the gap between elder justice service providers and victim service providers.**
9. Grant Project Schedule, as allowed in approval documents, or as proposed:  
Start-Date: **July 1, 2016**                      End-Date: **December 31, 2019**
10. a. Amount budgeted for contractual services: **\$10,000**  
b. Will contractual services be put out to bid? **Yes**  
c. If so, will contract services help to further the goals of the Department's Local Business Enterprise (LBE) requirements? **No, we will not be able to use the contracting process to promote LBE goals as this is federal funding which prohibits regional preferences.**  
d. Is this likely to be a one-time or ongoing request for contracting out? **One time**
11. a. Does the budget include indirect costs?  
 Yes                       No  
b. 1. If yes, how much? **\$58,212**  
b. 2. How was the amount calculated? **10% of direct salaries and fringes**  
c. 1. If no, why are indirect costs not included?  
 Not allowed by granting agency                       To maximize use of grant funds on direct services  
 Other (please explain):  
c. 2. If no indirect costs are included, what would have been the indirect costs?

12. Any other significant grant requirements or comments:  
**We request for approval of the \$375,000 increase in funds awarded from \$500,000 to \$875,000 including match of \$175,000. In addition, the project period end date changed from June 30, 2018 to December 31, 2019.**

**\*\*Disability Access Checklist\*\*\*(Department must forward a copy of all completed Grant Information Forms to the Mayor's Office of Disability)**

13. This Grant is intended for activities at (check all that apply):

- |  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Existing Site(s) | <input type="checkbox"/> Existing Structure(s)      | <input checked="" type="checkbox"/> Existing Program(s) or Service(s) |
| <input type="checkbox"/> Rehabilitated Site(s)       | <input type="checkbox"/> Rehabilitated Structure(s) | <input type="checkbox"/> New Program(s) or Service(s)                 |
| <input type="checkbox"/> New Site(s)                 | <input type="checkbox"/> New Structure(s)           |   |

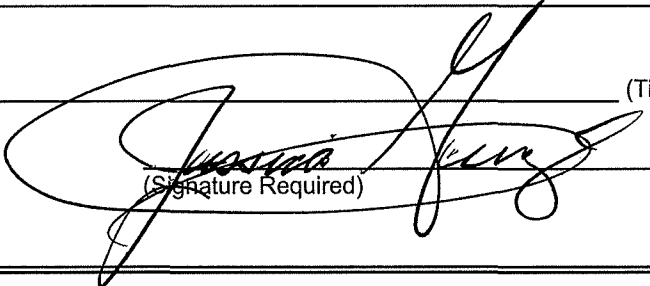
14. The Departmental ADA Coordinator or the Mayor's Office on Disability have reviewed the proposal and concluded that the project as proposed will be in compliance with the Americans with Disabilities Act and all other Federal, State and local disability rights laws and regulations and will allow the full inclusion of persons with disabilities. These requirements include, but are not limited to:

1. Having staff trained in how to provide reasonable modifications in policies, practices and procedures;
2. Having auxiliary aids and services available in a timely manner in order to ensure communication access;
3. Ensuring that any service areas and related facilities open to the public are architecturally accessible and have been inspected and approved by the DPW Access Compliance Officer or the Mayor's Office on Disability Compliance Officers.

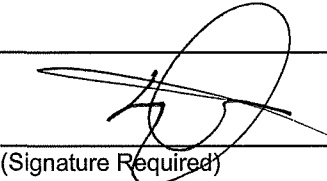
If such access would be technically infeasible, this is described in the comments section below:

Comments:

Departmental ADA Coordinator or Mayor's Office of Disability Reviewer:

Jessica Geiger  
(Name)  
Facilities Manager (Title)  
Date Reviewed: 3/6/18  
  
(Signature Required)

Department Head or Designee Approval of Grant Information Form:

Eugene Clendinen  
(Name)  
Chief Administrative & Financial Officer  
(Title)  
Date Reviewed: 3/6/18  
  
(Signature Required)

**BUDGET CATEGORY AND LINE ITEM DETAIL**

Subrecipient: City & County of San Francisco				Subaward #: XE16 01 0380			
A. Personal Services – Salaries/Employee Benefits	15 VOCA	15 VOCA MATCH	16 VOCA	16 VOCA MATCH	17 VOCA	17 VOCA MATCH	COST
8129 VW Investigator/Victim Advocate - Peter Huynh Biweekly salary (01/01/17-6/30/17): \$2,800 x 13 pay periods x 1 FTE = \$36,400	\$36,400						\$36,400
Biweekly salary (07/01/17-08/31/18): \$3,021 x 30.5 pay periods x 1 FTE = \$92,140.5	\$92,141						\$92,141
Biweekly salary (09/01/18-08/31/19): \$3,021 x 26 pay periods x 1 FTE = \$78,546			\$78,546				\$78,546
Biweekly salary (09/01/19-12/31/19): \$3,021 x 8.7 pay periods x 1 FTE = \$26,283					\$26,283		\$26,283
Bilingual pay (01/01/17-08/31/18): \$40 x 43.5 pay periods x 1 FTE + \$1,740	\$1,740						\$1,740
Bilingual pay (09/01/18-08/31/19): \$40 x 26 pay periods x 1 FTE + \$1,040			\$1,040				\$1,040
Bilingual pay (09/01/19-12/31/19): \$40 x 8.7 pay periods x 1 FTE + \$348					\$348		\$348
8129 VW Investigator/Victim Advocate - Emily Burtch Biweekly salary (01/01/17-6/30/17): \$2,247 x 13 pay periods x 0.75 FTE = \$21,908	\$21,908						\$21,908
Biweekly salary (07/01/17-12/31/17): \$2,609 x 13 pay periods x 0.75 FTE = \$25,438	\$25,438						\$25,438
Biweekly salary (01/01/18-08/31/18): \$2,740 x 17.5 pay periods x 0.75 FTE = \$35,963	\$35,963						\$35,963
Biweekly salary (09/01/18-12/31/18): \$2,740 x 8.6 pay periods x 0.75 FTE = \$17,673			\$17,673				\$17,673
Biweekly salary (01/01/19-08/31/19): \$2,877 x 17.4 pay periods x 0.75 FTE = \$37,545			\$37,544				\$37,544
Biweekly salary (09/01/19-12/31/19): \$2,877 x 8.7 pay periods x 0.75 FTE = \$18,772					\$18,773		\$18,773
<i>Victim Advocate Fringe Benefits: 47.8237% for P. Huynh &amp; E. Burtch</i> Social Security: 6.2% Social Security Medicare: 1.45% Health Insurance: \$3,401 Dependent Coverage: \$9,617 Long Term Disability: 0.35% Retirement: 20.16% Unemployment Insurance: 0.27%	\$59,750	\$26,932	\$72,023	\$7,909	\$13,811	\$7,903	\$188,328
Volunteer Match @ 8129 \$31.05 hourly rate x 1,552 hours = \$48,190 \$31.98 hourly rate x 1,552 hours = \$49,633		\$48,190		\$49,633			\$48,190 \$49,633
<b>Personal Section Totals</b>	\$273,340	\$75,122	\$206,826	* \$57,542	\$59,215	\$7,903	\$679,948
<b>PERSONAL SECTION TOTAL</b>							\$679,948

**BUDGET CATEGORY AND LINE ITEM DETAIL**

Subrecipient: City & County of San Francisco				Subaward #: XE16 01 0380			
B. Operating Expenses	15 VOCA	15 VOCA MATCH	16 VOCA	16 VOCA MATCH	17 VOCA	17 VOCA MATCH	COST
Public Awareness Campaign	\$52,815	\$22,185	\$1,230			\$7,974	\$84,204
Sing Tao Weekly Newspaper							
4 full page ads x \$2,000 per ad = \$8,000							
San Francisco Examiner Newspaper							
4 full page ads x \$3,500 per ad = \$14,000							
FM 96.1 Mandarin Radio							
4 radio ads x \$1,000 per ad = \$4,000							
KGO Radio							
4 radio ads x \$1,000 per ad = \$4,000							
Billboard							
3 billboards x \$12,000 each = \$36,000							
Outreach Materials							
3,000 bags x \$2 per bag = \$6,000							
6,102 brochures x \$2 per brochure = \$12,204							
Contractors	\$12,000						\$12,000
Graphic Designer x \$10,000							
Material Translation x \$2,000							
Emergency financial assistance for victims	\$22,500						\$22,500
15 victims x \$1,500 maximum = \$22,500							
Travel for Project Director's Meetings	\$4,738						\$4,738
Airfare: \$300 x 2 staff x 2 trips = \$1,200							
Hotel: \$150 x 2 staff x 3 nights x 2 trips = \$1,800							
Per diem: \$73 x 2 staff x 3 days x 1 trip = \$438							
Ground transportation: \$200 x 2 staff x 2 trips = \$800							
Mileage: \$0.535 x 934 miles = \$500							
Rent							
Rent (01/01/17-8/30/18): 125 square feet x \$21/square foot x 1.75 FTE x 1.5833 yrs	\$7,273						\$7,273
Rent (09/01/18-8/30/19): 125 square feet x \$21/square foot x 1.75 FTE x 1 yr			\$4,594				\$4,594
Rent (09/01/19-12/31/19): 125 square feet x \$21/square foot x 1.75 FTE x 0.333 yr					\$1,531		\$1,531
Indirect - 10% di minimus	\$27,334	\$2,693	\$20,683	\$791	\$5,921	\$790	\$58,212
10% x \$582,125 salary & fringe = \$58,212							
Use for indirect - general administration, Finance, Payroll, Human Resources, Information Technology, and Executive Management							
<b>Operating Section Totals</b>	<b>\$126,660</b>	<b>\$24,878</b>	<b>\$26,507</b>	<b>\$791</b>	<b>\$7,452</b>	<b>\$8,764</b>	<b>\$195,052</b>
<b>OPERATING SECTION TOTAL</b>							<b>\$195,052</b>



**BUDGET CATEGORY AND LINE ITEM DETAIL**

Subrecipient: City & County of San Francisco				Subaward #: XE16 01 0380			
C. Equipment	15 VOCA	15 VOCA MATCH	16 VOCA	16 VOCA MATCH	17 VOCA	17 VOCA MATCH	COST
None requested.							\$0
<b>Equipment Section Totals</b>	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>EQUIPMENT SECTION TOTAL</b>							\$0
<b>Category Totals</b>							
<i>Same as Section 12G on the Grant Subaward Face Sheet</i>	\$400,000	\$100,000	\$233,333	\$58,333	\$66,667	\$16,667	
<b>Total Project Cost</b>							<b>\$875,000</b>

**CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES**

**GRANT SUBAWARD AMENDMENT** SUBAWARD #: XE16010380

Federal Grant # \_\_\_\_\_ FIPS# 075-00000 Amendment# 1  
 Project # N/A DUNS# \_\_\_\_\_ Performance Period 07/01/2016 to 12/31/2019

This amendment is between the California Governor's Office of Emergency Services, hereafter called Cal OES, and the Grant Subrecipient: San Francisco, City & County

Grant Subaward #XE16010130 between the parties here to is hereby amended to:  
 To change the end of performance period of the Subaward from 06/30/2018 to 12/31/2019.

Increase the 15VOCA funds by \$0 from \$400,000 to \$400,000.  
 Increase the 15VOCA match by \$0 from \$100,000 to \$100,000.

Increase the 16VOCA funds by \$233,333 from \$0 to \$233,333.  
 Increase the 16VOCA match by \$58,333 from \$0 to \$58,333.

Increase the 17VOCA funds by \$66,667 from \$0 to \$66,667.  
 Increase the 17VOCA match by \$16,667 from \$0 to \$16,667.

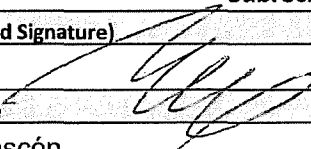
Increase the Total Project Cost by \$375,000 from \$500,000 to \$875,000.

**SPECIAL CONDITIONS:**

- 15VOCA funds in the amount of \$500,000 must be expended by 8/31/2018. The Final 2-201 for 15VOCA funds must be submitted by 8/31/2018.
- 16VOCA funds in the amount of \$291,666 must be expended by 8/31/2019. The Final 2-201 for 16VOCA funds must be submitted by 8/31/2019.
- The 2017 VOCA Funds in the amount of \$83,334 cannot be expended until the FY 2017/18 Federal VOCA Award is received by Cal OES. Should the Federal VOCA award be reduced, you will be notified and required to amend the Subaward.

Failure to comply with these requirements may result in the withholding and disallowance of grant payments, the reduction or termination of the Grant Subaward.

All other provisions of this agreement shall remain as previously agreed upon.

Subrecipient (Certification and Signature of Authorized Agent)				
By (Authorized Signature)		Date		
		9-21-17		
Printed Name		Title		
George Gascón		District Attorney		
Address				
850 Bryant Street, Room 322, San Francisco, CA 94103-4600				
Governor's Office of Emergency Services (For Cal OES use only)				
By Director or Designee		Date		
Printed Name		Title		
Amount Encumbered by this Document	Program/Component	Match	Item	
Prior Amount Encumbered	Fund Source	Chapter	Statute	Fiscal Year
Total Amount Encumbered to Date	PCA #	Project #	CFDA #	
I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purpose of the expenditure stated above.				
Signature of Cal OES Fiscal Officer		Date		

# GRANT SUBAWARD MODIFICATION

MAIL TO: California Governor's Office Of Emergency Services

3650 Schriever Ave  
Mather, CA 95655:

1. Subaward #: XE16 01 0380

2. Modification # 1

3. Subrecipient/Implementing Agency: City & County of San Francisco

4. Project Title: Elder Abuse (XE) Program

5. Contact Person: Lorna Garrido Phone: (415) 553-9258 Fax: (415) 553-9700

Email Address: lorna.garrido@sfgov.org 6. Performance Period: 07/01/2016 to 12/31/2019

7. Payment Mailing Address: 850 Bryant Street, Room 322, San Francisco, CA 94103  Check here if new.

### 8. Revision to Budget

FISCAL YEAR	Current Allocation Select Acronym from list	Grant Funds				Required Match				Total
		A. Personal Services	B. Operating Expenses	C. Equipment	Fund Total	A. Personal Services	B. Operating Expenses	C. Equipment	Match Total	
15	VOCA	\$285,762	\$114,238		\$400,000	\$46,801	\$53,199		\$100,000	\$500,000
16	VOCA				\$0				\$0	\$0
17	VOCA				\$0				\$0	\$0
Yr	Fund				\$0				\$0	\$0
Yr	Fund				\$0				\$0	\$0
<b>Proposed Change {add (+) or subtract (-) from budgeted amount}</b>										
15	VOCA	(\$12,422)	\$12,422		\$0	\$28,321	(\$28,321)		\$0	\$0
16	VOCA	\$206,826	\$26,507		\$233,333	\$57,542	\$791		\$58,333	\$291,666
17	VOCA	\$59,215	\$7,452		\$66,667	\$7,903	\$8,764		\$16,667	\$83,334
Yr	Fund				\$0				\$0	\$0
Yr	Fund				\$0				\$0	\$0
<b>Revised Allocation</b>										
15	VOCA	\$273,340	\$126,660	\$0	\$400,000	\$75,122	\$24,878	\$0	\$100,000	\$500,000
16	VOCA	\$206,826	\$26,507	\$0	\$233,333	\$57,542	\$791	\$0	\$58,333	\$291,666
17	VOCA	\$59,215	\$7,452	\$0	\$66,667	\$7,903	\$8,764	\$0	\$16,667	\$83,334
Yr	Fund	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Yr	Fund	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

9. Justification for Modification: (If necessary, continue the justification on page 3.)

See page 3.

Check to Total

**10. Subrecipient Approvals**

Gena Castro-Rodriguez

Project Director (typed name)

Eugene Clepdinen

Financial Officer (typed name)

Gena Castro-Rodriguez 9/22/17

Project Director Signature

Date

[Signature] 9/22/17

Financial Officer Signature

Date

**Cal OES Approval Signatures**

Program Specialist

Date

Unit Chief

Date

Grants Processing

Date

# GRANT SUBAWARD MODIFICATION

## Cal OES 2-223 INSTRUCTIONS

**GENERAL INSTRUCTIONS** – This form must be used for the following types of modification requests:

- Budget Revisions
- Grant Extensions\*
- Increases/Decreases to Grant Funds\*
- Sole Source Requests
- Reporting Project Income
- Change of Project Director or Financial Officer
- Change in Program Objectives
- Change in Mailing Address
- Agency Name Change\*
- Change in physical address

\*requires submission of a Grant Award Amendment form

- 1. SUBAWARD NUMBER:**  
Enter the Subaward number as it appears at the top of the approved Grant Subaward Face Sheet.
- 2. MODIFICATION NUMBER:**  
Enter the number of this request. Each modification must be consecutively numbered starting with #1.
- 3. SUBRECIPIENT/IMPLEMENTING AGENCY:**  
Enter the Subrecipient and implementing agency names as they appear on lines 1 & 2 of the approved Grant Subaward Face Sheet.
- 4. PROJECT TITLE:**  
Enter the project title of the program.
- 5. CONTACT PERSON:**  
Enter the name, phone, fax, and email address of the person to contact regarding questions on this form.
- 6. PERFORMANCE PERIOD**  
Enter the approved performance period giving the start and end dates for the grant award as shown on #6 of the Grant Subaward Face Sheet or subsequent approved Grant Subaward Amendment.
- 7. PAYMENT MAILING ADDRESS:**  
Enter the payment mailing address where the Subrecipient payments are to be mailed as specified on the approved Grant Subaward Face Sheet or subsequent approved modification. Check the **NEW** box if there is a change in the payment mailing address.
- 8. REVISION TO BUDGET:**  
If this modification affects the budget, select the Fiscal Year (FY) and fund acronym from the drop down lists under Current Allocation (if unsure what the fund acronym is, see the chart below) for the Federal grant OR State grant to which the modification applies in the column heading. Enter the current allocation amounts for each category and the corresponding match amount if any. Enter the proposed change amounts. (If your calculations are correct your totals will be 0). The revised allocation amounts should automatically populate. Check the "Total" box, for the form to finish calculating the "TOTAL" column correctly.
- 9. JUSTIFICATION FOR MODIFICATION:**  
Explain the need for this modification. If requesting a revision to the budget, be specific of the funding source. Additional space is provided on page 3 to continue the justification if necessary.
- 10. SUBRECIPIENT APPROVALS NAME AND SIGNATURES:**  
Please type the names of, and provide original signatures for; the Project Director and the Financial Officer as shown on the "Signature Authorization Form (Cal OES 2-103).

FEDERAL PROJECT ACRONYMS							
BVPP	Bulletproof Vest Partnership Program	CJA0	Child Justice Act Program	DNAE	California DNA Evidence Assistance Program	DNAP	Post-Conviction DNA Testing Assistance Program
FSIA	Forensic Science Improvement Program	FVPS	Family Violence Prevention Services Program	JAG0	Justice Assistance Grant Program	JAGX	Justice Assistance Grant Interest Program
PSNC	Project Safe Neighborhood Program	PSNE	Project Safe Neighborhood Program	PSNN	Project Safe Neighborhood Program	SASP	Sexual Assault Services Program
VADG	Victim Assistance Discretionary Grant Training Program	VAWA	Violence Against Women Act Program	VOCA	Victims of Crime Act Program		
STATE PROJECT ACRONYMS							
CASV	CA Sexual Violence Victim Services	CDVV	CA Domestic Violence Victims	CSAE	Child Abuse and Exploitation Program	CSAP	Child Sexual Abuse Treatment Program
CVHT	Child Victims of Human Trafficking	DVP0	Domestic Violence Program	EHAf	Emergency Housing and Assistance Funds	EPSP	Equality In Preventive Services Program
FV00	Family Violence Prevention Program	HTVA	Human Trafficking Victims Assistance	HY00	Homeless Youth Program	ICAC	Internet Crimes Against Children Program
PPPD	Local Prosecutor/Local Public Defender Program	RCP0	Rape Crisis Program	RCP5	Rape Crisis Program	VLRC	Victims Legal Resource Center Program
VWA0	Victim Witness Assistance Program	VWR0	Victim Witness Assistance Program (Restitution)	YET0	Youth Emergency Telephone Program		

**GRANT SUBAWARD MODIFICATION JN**  
**Cal OES 2-223 INSTRUCTIONS**

9. Justification for Modification (cont.)

To change the end of performance period of the Subaward from 06/30/2018 to 12/31/2019.

Increase the 15VOCA funds by \$0 from \$400,000 to \$400,000.

Increase the 15VOCA match by \$0 from \$100,000 to \$100,000.

Increase the 16VOCA funds by \$233,333 from \$0 to \$233,333.

Increase the 16VOCA match by \$58,333 from \$0 to \$58,333.

Increase the 17VOCA funds by \$66,667 from \$0 to \$66,667.

Increase the 17VOCA match by \$16,667 from \$0 to \$16,667.

Increase the Total Project Cost by \$375,000 from \$500,000 to \$875,000.

**BUDGET CATEGORY AND LINE ITEM DETAIL**

Subrecipient: City & County of San Francisco				Subaward #: XE16 01 0380			
A. Personal Services – Salaries/Employee Benefits	15 VOCA	15 VOCA MATCH	16 VOCA	16 VOCA MATCH	17 VOCA	17 VOCA MATCH	COST
8129 VW Investigator/Victim Advocate - Peter Huynh Biweekly salary (01/01/17-6/30/17): \$2,800 x 13 pay periods x 1 FTE = \$36,400 Biweekly salary (07/01/17-08/31/18): \$3,021 x 30.5 pay periods x 1 FTE = \$92,140.5 Biweekly salary (09/01/18-08/31/19): \$3,021 x 26 pay periods x 1 FTE = \$78,546 Biweekly salary (09/01/19-12/31/19): \$3,021 x 8.7 pay periods x 1 FTE = \$26,283 Bilingual pay (01/01/17-08/31/18): \$40 x 43.5 pay periods x 1 FTE + \$1,740 Bilingual pay (09/01/18-08/31/19): \$40 x 26 pay periods x 1 FTE + \$1,040 Bilingual pay (09/01/19-12/31/19): \$40 x 8.7 pay periods x 1 FTE + \$348	\$36,400 \$92,141		\$78,546		\$26,283		\$36,400 \$92,141 \$78,546 \$26,283 \$1,740 \$1,040 \$348
8129 VW Investigator/Victim Advocate - Emily Burtch Biweekly salary (01/01/17-6/30/17): \$2,247 x 13 pay periods x 0.75 FTE = \$21,908 Biweekly salary (07/01/17-12/31/17): \$2,609 x 13 pay periods x 0.75 FTE = \$25,438 Biweekly salary (01/01/18-08/31/18): \$2,740 x 17.5 pay periods x 0.75 FTE = \$35,963 Biweekly salary (09/01/18-12/31/18): \$2,740 x 8.6 pay periods x 0.75 FTE = \$17,673 Biweekly salary (01/01/19-08/31/19): \$2,877 x 17.4 pay periods x 0.75 FTE = \$37,545 Biweekly salary (09/01/19-12/31/19): \$2,877 x 8.7 pay periods x 0.75 FTE = \$18,772	\$21,908 \$25,438 \$35,963		\$17,673 \$37,544		\$18,773		\$21,908 \$25,438 \$35,963 \$17,673 \$37,544 \$18,773
Victim Advocate Fringe Benefits: 47.8237% for P. Huynh & E. Burtch Social Security: 6.2% Social Security Medicare: 1.45% Health Insurance: \$3,401 Dependent Coverage: \$9,617 Long Term Disability: 0.35% Retirement: 20.16% Unemployment Insurance: 0.27%	\$59,750	\$26,932	\$72,023	\$7,909	\$13,811	\$7,903	\$188,328
Volunteer Match @ 8129 \$31.05 hourly rate x 1,552 hours = \$48,190 \$31.98 hourly rate x 1,552 hours = \$49,633		\$48,190		\$49,633			\$48,190 \$49,633
<b>Personal Section Totals</b>	<b>\$273,340</b>	<b>\$75,122</b>	<b>\$206,826</b>	<b>\$57,542</b>	<b>\$59,215</b>	<b>\$7,903</b>	<b>\$679,948</b>
<b>PERSONAL SECTION TOTAL</b>							<b>\$679,948</b>

**JDGET CATEGORY AND LINE ITEM DET.**

Subrecipient: City & County of San Francisco				Subaward #: XE16 01 0380			
B. Operating Expenses	15 VOCA	15 VOCA MATCH	16 VOCA	16 VOCA MATCH	17 VOCA	17 VOCA MATCH	COST
Public Awareness Campaign Sing Tao Weekly Newspaper 4 full page ads x \$2,000 per ad = \$8,000 San Francisco Examiner Newspaper 4 full page ads x \$3,500 per ad = \$14,000 FM 96.1 Mandarin Radio 4 radio ads x \$1,000 per ad = \$4,000 KGO Radio 4 radio ads x \$1,000 per ad = \$4,000 Billboard 3 billboards x \$12,000 each = \$36,000 Outreach Materials 3,000 bags x \$2 per bag = \$6,000 6,102 brochures x \$2 per brochure = \$12,204	\$52,815	\$22,185	\$1,230			\$7,974	\$84,204
Contractors Graphic Designer x \$10,000 Material Translation x \$2,000	\$12,000						\$12,000
Emergency financial assistance for victims 15 victims x \$1,500 maximum = \$22,500	\$22,500						\$22,500
Travel for Project Director's Meetings Airfare: \$300 x 2 staff x 2 trips = \$1,200 Hotel: \$150 x 2 staff x 3 nights x 2 trips = \$1,800 Per diem: \$73 x 2 staff x 3 days x 1 trip = \$438 Ground transportation: \$200 x 2 staff x 2 trips = \$800 Mileage: \$0.535 x 934 miles = \$500	\$4,738						\$4,738
Rent Rent (01/01/17-8/30/18): 125 square feet x \$21/square foot x 1.75 FTE x 1.5833 yrs	\$7,273						\$7,273
Rent (09/01/18-8/30/19): 125 square feet x \$21/square foot x 1.75 FTE x 1 yr			\$4,594				\$4,594
Rent (09/01/19-12/31/19): 125 square feet x \$21/square foot x 1.75 FTE x 0.333 yr					\$1,531		\$1,531
Indirect - 10% di minimus 10% x \$582,125 salary & fringe = \$58,212 Use for indirect - general administration, Finance, Payroll, Human Resources, Information Technology, and Executive Management	\$27,334	\$2,693	\$20,683	\$791	\$5,921	\$790	\$58,212
<b>Operating Section Totals</b>	<b>\$126,660</b>	<b>\$24,878</b>	<b>\$26,507</b>	<b>\$791</b>	<b>\$7,452</b>	<b>\$8,764</b>	<b>\$195,052</b>
<b>OPERATING SECTION TOTAL</b>							<b>\$195,052</b>

**BUDGET CATEGORY AND LINE ITEM DETAIL**

Subrecipient: City & County of San Francisco				Subaward #: XE16 01 0380			
C. Equipment	15 VOCA	15 VOCA MATCH	16 VOCA	16 VOCA MATCH	17 VOCA	17 VOCA MATCH	COST
None requested.							\$0
Equipment Section Totals	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>EQUIPMENT SECTION TOTAL</b>							\$0
<b>Category Totals</b>							
<i>Same as Section 12G on the Grant Subaward Face Sheet</i>	<b>\$400,000</b>	<b>\$100,000</b>	<b>\$233,333</b>	<b>\$58,333</b>	<b>\$66,667</b>	<b>\$16,667</b>	
<b>Total Project Cost</b>							<b>\$875,000</b>



**Budget Narrative**

Budget Period: 7/1/2016 – 12/31/2019 (3.5 years)

**A. PERSONAL SERVICES \$679,948**

Two victim advocates (8129 Victim Witness Investigator I) @ 1.75 FTE will be assigned to this grant and will be responsible for direct client services, day-to-day coordination with partner agencies, data tracking, trainings to community-based organizations, coordinating Division administrative functions and communications, and the completion of required program reporting. The victim advocates will also provide case management for victims served under the XE program, coordinate the multidisciplinary team that will respond to elder abuse cases, provide consultation and outreach to elders, and collect and report on data related to services provided.

Total volunteer hours of 3,104 hours will be used as an in-kind match. The total match of \$97,823 is calculated at the step 1 rate of an 8129 Victim Advocate.

Standard fringe benefits are allocated to the grant and include social security, Medicare, retirement, state unemployment compensation insurance, long-term disability, dependent coverage, and health and dental coverage for a total fringe cost of \$92,545.

**B. OPERATING EXPENSES \$195,052****Public Awareness Campaigns**

A large portion of the XE program will be to conduct outreach to the elder population regarding financial abuse and pedestrian safety. A mix of print, radio, billboards, and outreach materials will be used and is estimated at \$96,204 to include graphic designer and translation services. Brochures and re-usable bags will be used for outreach and education in

the community at in person events to be held at elder service agencies, community events and information sessions. The goal is to decrease elder pedestrian risk and increase safety.

Description	Quantity	Per unit cost	Total
Sing Tao Weekly, full page ad	4	\$2,000	\$8,000
San Francisco Examiner, ad	4	\$3,500	\$14,000
FM 96.1 Mandarin Radio, ad	4	\$1,000	\$4,000
KGO Radio, ad	4	\$1,000	\$4,000
Billboard (3 billboards @ 3 locations x 4 times)	3	\$12,000	\$36,000
Bags	3,000	\$2	\$6,000
Brochures	6,102	\$2	\$12,204
Graphic Designer	1	\$10,000	\$10,000
Translation of materials	1	\$2,000	\$2,000

The office issued a Request for Qualifications (RFQ) for *As-Needed Communications Consultant for SFDA Public Awareness Campaigns* in October 2014 and it is through this RFQ that the Graphic Designer services will be obtained.

#### Emergency Financial Assistance

Critical losses due to crime victimization will be assessed along with financial need and ability to access resources from other sources. If determined that the victim has direct crime related losses not covered by other sources within 48 hours of the crime, the advocate will apply to for funds up to \$1,500 from the Emergency Assistance Fund to pay for items such as food, clothing, taxis, prophylactic and non-prophylactic medication, medical equipment, health care items including glasses, dentures, hearing aids, and other items as need. The Emergency Financial Assistance fund is budgeted at \$1,500 per victim x 15 victims for a total cost of \$22,500.

Travel

The mandatory Project Director's meeting and other travel and training is budgeted at \$4,738.

Airfare:  $\$300 \times 2 \text{ staff} \times 2 \text{ trips} = \$1,200$

Hotel:  $\$150 \times 2 \text{ staff} \times 3 \text{ nights} \times 2 \text{ trips} = \$1,800$

Per diem:  $\$73 \times 2 \text{ staff} \times 3 \text{ days} \times 1 = \$438$

Ground transportation:  $\$200 \times 2 \text{ staff} \times 2 \text{ trips} = \$800$

Mileage:  $\$0.535 \times 934 \text{ miles} = \$500$

Rent

Total rent of \$13,398 is calculated on 125 square feet at \$21/square foot per FTE.

For 01/01/17-8/30/18:  $125 \text{ square feet} \times \$21/\text{square foot} \times 1.75 \text{ FTE} \times 1.5833 \text{ yrs.} = \$7,273$

For 09/01/18-8/30/19:  $125 \text{ square feet} \times \$21/\text{square foot} \times 1.75 \text{ FTE} \times 1 \text{ yr.} = \$4,594$

For 09/01/19-12/31/19:  $125 \text{ square feet} \times \$21/\text{square foot} \times 1.75 \text{ FTE} \times 0.333 \text{ yr.} = \$1,531$

Indirect

Indirect costs are budgeted at 10% of salaries and fringe. Indirect costs are not directly attributable to any one program and include, but not limited to, general administration, Finance, Payroll, Human Resources, Information Technology, and Executive Management.

$10\% \text{ de Minimis} \times \$582,125 \text{ salary \& fringe} = \$58,212$

**C. EQUIPMENT**

No equipment is budgeted for the grant period.

**CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES  
SUBRECIPIENT GRANTS MANAGEMENT ASSESSMENT**

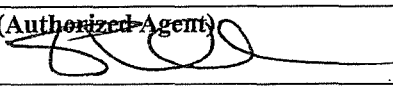
<b>Subrecipient:</b> City & County of San Francisco	<b>DUNS #:</b> 143602105	<b>FIPS #:</b> 075-00000
<b>Grant Disaster/Program Title:</b> Elder Abuse (XE) Program		
<b>Performance Period:</b> 07/01/2016 to 12/31/2019	<b>Subaward Amount Requested:</b> \$ 700,000	
<b>Type of Non-Federal Entity (Check Box)</b>	<input type="checkbox"/> State Gov. <input checked="" type="checkbox"/> Local Gov. <input type="checkbox"/> JPA <input type="checkbox"/> Non-Profit <input type="checkbox"/> Tribe	

Per Title 2 CFR § 200.331, Cal OES is required to evaluate the risk of noncompliance with federal statutes, regulations and grant terms and conditions posed by each subrecipient of pass-through funding. This assessment is made in order to determine and provide an appropriate level of technical assistance, training, and grant oversight to subrecipients for the award referenced above.

The following are questions related to your organization's experience in the management of grant awards. This questionnaire must be completed and returned with your grant application materials.

For purposes of completing this questionnaire, *grant manager* is the individual who has primary responsibility for day-to-day administration of the grant, *bookkeeper/accounting staff* means the individual who has responsibility for reviewing and determining expenditures to be charged to the grant award, and *organization* refers to the subrecipient applying for the award, or the governmental implementing agency, as applicable.

Assessment Factors	Response
1. How many years of experience does your current grant manager have managing grants?	>5 years
2. How many years of experience does your current bookkeeper/accounting staff have managing grants?	>5 years
3. How many grants does your organization currently receive?	>10 grants
4. What is the approximate total dollar amount of all grants your organization receive?	\$ 8,310,785
5. Are individual staff members assigned to work on multiple grants?	Yes
6. Do you use timesheets to track the time staff spend working on specific activities/projects?	Yes
7. How often does your organization have a financial audit?	Annually
8. Has your organization received any audit findings in the last three years?	No
9. Do you have a written plan on how you charge costs to grants?	Yes
10. Do you have written procurement policies?	Yes
11. Do you get multiple quotes or bids when buying items or services?	Always
12. How many years do you maintain receipts, deposits, cancelled checks, invoices, etc.?	>5 years
13. Do you have procedures to monitor grant funds passed through to other entities?	Yes

<b>Certification:</b> <i>This is to certify that, to the best of our knowledge and belief, the data furnished above is accurate, complete and current.</i>	
<b>Signature:</b> (Authorized Agent) 	<b>Date:</b> 9-7-17
<b>Print Name:</b> Sheila Arcelona	<b>Print Title:</b> Assistant Chief Administrative and Financial Officer

## PROJECT SUMMARY INSTRUCTIONS

All of the necessary project information must be placed on the form in the space allowed. **Additional pages may not be added.** This is a summary of the project narrative:

1. **SUBAWARD NUMBER:**  
Enter the Subaward # as it appears on the approved Grant Subaward Face Sheet.
2. **PROGRAM TITLE:**  
Enter the program, title as it appears on the approved Grant Subaward Face Sheet
3. **PERFORMANCE PERIOD:**  
Enter beginning and ending dates of the performance period for the Grant Subaward.
4. **SUBRECIPIENT:**  
Enter the Subrecipient name as it appears on the approved Grant Subaward Face Sheet.
5. **GRANT AMOUNT:**  
Enter the amount of grant funds requested. This must be the same amount used on the budget pages and block 12G on the Grant Award Face Sheet.
6. **IMPLEMENTING AGENCY:**  
Enter the implementing agency as it appears on the approved Grant Subaward Face Sheet.
7. **PROGRAM DESCRIPTION:**  
Provide a description of the specific area of service Cal OES is authorized to fund based upon state or federal legislation.
8. **PROBLEM STATEMENT:**  
Describe the problem the project will address. Support the problem with data such as number of offenses, description of the target area, and local needs.
9. **OBJECTIVES:**  
Include the quantifiable measurements which define a course of action in order to accomplish the program goals.
10. **ACTIVITIES:**  
Describe activities you will perform to accomplish each objective (quantify where possible).
11. **EVALUATION:**  
Describe how project performance will be measured, if applicable. Note who will conduct the evaluation, (e.g., project staff, government personnel, or outside consultants).
12. **NUMBER OF CLIENTS TO BE SERVED:**  
Enter the number of clients, if applicable.
13. **PROJECT BUDGET:**  
Amounts in each category must be the same as the Budget Pages amounts. The total must be the same as the total in box 12G on the Grant Award Face Sheet.

## PROJECT SUMMARY

<b>1. Subaward #:</b> XE16 01 0380		<b>3. PERFORMANCE PERIOD</b>	
<b>2. PROJECT TITLE</b> Elder Abuse (XE) Program		07/01/2016 to 12/31/2019	
<b>4. SUBRECIPIENT</b>		<b>5. GRANT AMOUNT</b>	
Name:	City & County of San Francisco	Phone:	415-734-3359
Address:	850 Bryant Street, Room 322	Fax #:	415-553-1034
City:	San Francisco	Zip:	94103-4600
<b>5. GRANT AMOUNT</b> (this is the same amount as 12G of the Grant Subaward Face Sheet)  \$ 875,000			
<b>6. IMPLEMENTING AGENCY</b>			
Name:	District Attorney's Office/Victim Services Div.	Phone:	415-553-9044
		Fax #:	415-553-1034
Address:	850 Bryant Street, Room 320	City:	San Francisco
		Zip:	94103
<b>7. PROGRAM DESCRIPTION</b>			
<p>The Elder Abuse Program (EAP) is housed within the San Francisco District Attorney's Office (SFDA), Victim Services Division. The EAP staff has an impressive track record of addressing the needs of senior victims of violent crime and working closely with public safety and community-based partners. Elder abuse victims receive streamlined services from initial referral through case adjudication, closure, and beyond; and benefit from the policy advocacy activities of the EAP.</p>			
<b>8. PROBLEM STATEMENT</b>			
<p>Francisco has one of the highest concentrations of seniors living independently, and is home to an increasingly aging population. In fact, according to the 2010 Census, 14% (or 112,833) of San Francisco's population is 65 or older and is expected to grow by 100% by the year 2020. These older adults include a high concentration of non-English speaking seniors (over half of reported San Francisco elder abuse victims are minorities and almost one-third are non-English speaking), LGBT seniors, and a higher than average percentage of individuals with disabilities, 44% of whom are non-institutionalized disabled. San Francisco has a diverse elder population, and this diversity means we have diverse needs that can pose challenges in service delivery. In 2015, the Elder Abuse Program (EAP) served 311 victims of crime over the age of 60.</p>			
<b>9. OBJECTIVES</b>			
<ol style="list-style-type: none"><li>1. Direct Services.</li><li>2. Outreach and Public Awareness Campaign</li><li>3. Training: Elder abuse and criminal justice system education. Cr</li><li>4. Community Coordination: Strategic Collaboration and Coordination with Public Safety and other Partners.</li></ol>			

**10. ACTIVITIES**

Crisis Intervention Counseling, Criminal Justice Advocacy, Assistance Impact Statements, Crime Victim Compensation Benefits, Emergency Assistance, Referrals, Outreach to Seniors, Training to Providers, Community Events, Public Awareness Campaigns About Pedestrian Safety

**11. EVALUATION** (if applicable)**12. NUMBER OF CLIENTS**

(if applicable)

75 per year with direct services  
and 1,500 per year with outreach  
campaigns

**13. PROJECT BUDGET**

(these are the same amounts as on  
Budget Pages)

	<b>Personal Services</b>	<b>Operating Expenses</b>	<b>Equipment</b>	<b>TOTAL</b>
	\$679,948	\$195,052		\$875,000
				\$0
				\$0
				\$0
				\$0
				\$0
<b>Totals:</b>	\$679,948	\$195,052	\$0	\$875,000

EDMUND G. BROWN, JR.  
GOVERNOR



**Cal OES**  
GOVERNOR'S OFFICE  
OF EMERGENCY SERVICES

*Danielle N.*  
MARK S. GHILARDUCCI  
DIRECTOR

October 9, 2017

Gena Castro-Rodriguez  
Chief, Victim Services Division  
San Francisco, City & County of - District Attorney's Office  
850 Bryant Street, Room 322  
San Francisco, CA 94103-4600

Subject: **Approval of Subaward Amendment #1**  
Elder Abuse Program  
Subaward #: **XE16 01 0380**

Dear Ms. Castro-Rodriguez:

The California Governor's Office of Emergency Services (Cal OES) has received and approved the enclosed subaward amendment request, for the subject grant.

All other agreements shall remain as previously agreed upon.

Please contact your Program Specialist if you have any questions about this amendment.

VSPS GRANTS PROCESSING

Enclosure

c: Subrecipient file  
Program Specialist

3650 SCHRIEVER AVENUE • MATHER, CA 95655  
VICTIM SERVICES & PUBLIC SAFETY GRANTS PROCESSING UNIT  
TELEPHONE: (916) 845-8301 • FAX: (916) 636-3770



MP

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES

GRANT SUBAWARD AMENDMENT

SUBAWARD #: XE16010380

Federal Grant # 2015-VA-64-0058 / 2016-VA-64-0051/none FIPS# 075-00000 Amendment# 1
Project # N/A DUNS# 143602105 Performance Period 07/01/2016 to 12/31/2019

This amendment is between the California Governor's Office of Emergency Services, hereafter called Cal OES, and the Grant Subrecipient: San Francisco, City & County

Grant Subaward #XE16010380 between the parties here to is hereby amended to: To change the end of performance period of the Subaward from 06/30/2018 to 12/31/2019.

Increase the 15VOCA funds by \$0 from \$400,000 to \$400,000. Increase the 15VOCA match by \$0 from \$100,000 to \$100,000.

Increase the 16VOCA funds by \$233,333 from \$0 to \$233,333. Increase the 16VOCA match by \$58,333 from \$0 to \$58,333.

Increase the 17VOCA funds by \$66,667 from \$0 to \$66,667. Increase the 17VOCA match by \$16,667 from \$0 to \$16,667.

Increase the Total Project Cost by \$375,000 from \$500,000 to \$875,000.

SPECIAL CONDITIONS:

- 15VOCA funds in the amount of \$500,000 must be expended by 8/31/2018. The Final 2-201 for 15VOCA funds must be submitted by 8/31/2018.
16VOCA funds in the amount of \$294,666 must be expended by 8/31/2019. The Final 2-201 for 16VOCA funds must be submitted by 8/31/2019.
The 2017 VOCA Funds in the amount of \$85,334 cannot be expended until the FY 2017/18 Federal VOCA Award is received by Cal OES. Should the Federal VOCA award be reduced, you will be notified and required to amend the Subaward.
FINAL LIQUIDATION PERIOD IS REDUCED FROM 90 TO 60 CALENDAR DAYS FOLLOWING THE END OF THE GRANT PERIOD.

All other provisions of this agreement shall remain as previously agreed upon.

Subrecipient (Certification and Signature of Authorized Agent)
By: (Authorized Signature) Date: 9-21-17
Printed Name: George Gascón Title: District Attorney
Address: 850 Bryant Street, Room 322, San Francisco, CA 94103-4600
Governor's Office of Emergency Services (For Cal OES use only)
By Director or Designee Date: 10.5.17
Printed Name: Tabatha Stout Title: Assistant Director
Amount Encumbered by this Document Program/Component Match Item
300,000 40.20.451 20% CLK based on TPC 0690.102.0890
Prior Amount Encumbered Fund Source Chapter Statute Fiscal Year
400,000 Federal Trust 23/14 2016/2017 2016/17 2017/18
Total Amount Encumbered to Date PCA # Project # CFDA #
700,000 18405/18406 15VOCA/16VOCA/17VOCA 16.575
I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purpose of the expenditure stated above.
Signature of Cal OES Fiscal Officer Date: 10/4/17

# GRANT SUBAWARD MODIFICATION

MAIL TO: California Governor's Office Of Emergency Services  
 3650 Schriever Ave  
 Mather, CA 95655:

1. Subaward #: XE16 01 0380

2. Modification # 1

3. Subrecipient/Implementing Agency: San Francisco, City & County of - District Attorney's Office (DV)  
City & County of San Francisco, DISTRICT ATTORNEY'S OFFICE (A)

4. Project Title: Elder Abuse (XE) Program

5. Contact Person: Lorna Garrido Phone: (415) 553-9258 Fax: (415) 553-9700

Email Address: lorna.garrido@sfgov.org 6. Performance Period: 07/01/2016 to 12/31/2019

7. Payment Mailing Address: 850 Bryant Street, Room 322, San Francisco, CA 94103  Check here if new.

### 8. Revision to Budget

FISCAL YEAR	Current Allocation Select Acronym from list	Grant Funds				Required Match				Total
		A. Personal Services	B. Operating Expenses	C. Equipment	Fund Total	A. Personal Services	B. Operating Expenses	C. Equipment	Match Total	
15	VOCA	\$285,762	\$114,238		\$400,000	\$46,801	\$53,199		\$100,000	\$500,000
16	VOCA				\$0				\$0	\$0
17	VOCA				\$0				\$0	\$0
Yr	Fund				\$0				\$0	\$0
Yr	Fund				\$0				\$0	\$0
<b>Proposed Change (add (+) or subtract (-) from budgeted amount)</b>										
15	VOCA	(\$12,422)	\$12,422		\$0	\$28,321	(\$28,321)		\$0	\$0
16	VOCA	\$206,826	\$26,507		\$233,333	\$57,542	\$791		\$58,333	\$291,666
17	VOCA	\$59,215	\$7,452		\$66,667	\$7,903	\$8,764		\$16,667	\$83,334
Yr	Fund				\$0				\$0	\$0
Yr	Fund				\$0				\$0	\$0
<b>Revised Allocation</b>										
15	VOCA	\$273,340	\$126,660	\$0	\$400,000	\$75,122	\$24,878	\$0	\$100,000	\$500,000
16	VOCA	\$206,826	\$26,507	\$0	\$233,333	\$57,542	\$791	\$0	\$58,333	\$291,666
17	VOCA	\$59,215	\$7,452	\$0	\$66,667	\$7,903	\$8,764	\$0	\$16,667	\$83,334
Yr	Fund	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Yr	Fund	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

9. Justification for Modification: (If necessary, continue the justification on page 3.)

Check to Total

See page 3.

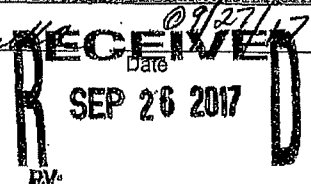
### 10. Subrecipient Approvals

<p><u>Gena Castro-Rodriguez</u>                  Project Director (typed name)</p> <p><i>Gena Castro Rodriguez</i> <u>9/22/17</u>                  Project Director Signature Date</p>	<p><u>Eugene Clendinen</u>                  Financial Officer (typed name)</p> <p><i>Eugene Clendinen</i> <u>9/22/17</u>                  Financial Officer Signature Date</p>
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### Cal OES Approval Signatures

<p><u>Danielle Nieto</u>                  Program Specialist</p> <p><i>Danielle Nieto</i> <u>9/26/17</u>                  Date</p>	<p><u>Monica Magallon</u>                  Unit Chief</p> <p><i>Monica Magallon</i> <u>10/3/17</u>                  Date</p>
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Grants Processing



**GRANT SUBAWARD MODIFICATION**  
**Cal OES 2-223 INSTRUCTIONS**

9. Justification for Modification (cont.)

To change the end of performance period of the Subaward from 06/30/2018 to 12/31/2019.

Increase the 15VOCA funds by \$0 from \$400,000 to \$400,000.

Increase the 15VOCA match by \$0 from \$100,000 to \$100,000.

Increase the 16VOCA funds by \$233,333 from \$0 to \$233,333.

Increase the 16VOCA match by \$58,333 from \$0 to \$58,333.

Increase the 17VOCA funds by \$66,667 from \$0 to \$66,667.

Increase the 17VOCA match by \$16,667 from \$0 to \$16,667.

Increase the Total Project Cost by \$375,000 from \$500,000 to \$875,000.

**CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES  
SUPPLEMENTAL GRANT SUBAWARD INFORMATION**

**1. Cal OES Contact Information Section:**

Governor's Office of Emergency Services  
 Mark S. Ghilarducci, Director  
 3650 Schriever Avenue  
 Mather, CA 95655  
 (916) 845-8506 phone • (916) 845-8511 fax

**2. Federal Awarding Agency Section:**

<b>Fund Year</b>	<b>Federal Program Fund / CFDA #</b>	<b>Federal Awarding Agency</b>	<b>Total Federal Award Amount</b>	<b>Total Local Assistance Amount</b>
2015	Victims of Crime Act (VOCA) / 16.575	Office for Victims of Crime	\$232,722,931	\$223,414,013
2016	Victims of Crime Act (VOCA) / 16.575	Office for Victims of Crime	\$264,297,285	\$253,725,394
2017	Victims of Crime Act (VOCA) / 16.575	Office for Victims of Crime	\$218,943,281	\$210,185,550
Choose an item.	Choose an item.	Choose an item.	\$	\$
Choose an item.	Choose an item.	Choose an item.	\$	\$

**3. Project Description Section:**

- Project Acronym (Please choose from drop down):  
Elder Abuse Program (XE)
- Project Description (Please type the Project Description):  
**To expand the multidisciplinary community response to elder and dependent adult abuse.**

**4. Research & Development Section:**

- Is this Subaward a Research & Development grant?      Yes       No

**BUDGET CATEGORY AND LINE ITEM DETAIL**

Subrecipient: City & County of San Francisco				Subaward #: XE16 01 0380			
A. Personal Services – Salaries/Employee Benefits	15 VOCA	15 VOCA MATCH	16 VOCA	16 VOCA MATCH	17 VOCA	17 VOCA MATCH	COST
8129 VW Investigator/Victim Advocate - Peter Huynh Biweekly salary (01/01/17-6/30/17): \$2,800 x 13 pay periods x 1 FTE = \$36,400	\$36,400						\$36,400
Biweekly salary (07/01/17-08/31/18): \$3,021 x 30.5 pay periods x 1 FTE = \$92,140.5	\$92,141						\$92,141
Biweekly salary (09/01/18-08/31/19): \$3,021 x 26 pay periods x 1 FTE = \$78,546			\$78,546				\$78,546
Biweekly salary (09/01/19-12/31/19): \$3,021 x 8.7 pay periods x 1 FTE = \$26,283					\$26,283		\$26,283
Bilingual pay (01/01/17-08/31/18): \$40 x 43.5 pay periods x 1 FTE + \$1,740	\$1,740						\$1,740
Bilingual pay (09/01/18-08/31/19): \$40 x 26 pay periods x 1 FTE + \$1,040			\$1,040				\$1,040
Bilingual pay (09/01/19-12/31/19): \$40 x 8.7 pay periods x 1 FTE + \$348					\$348		\$348
8129 VW Investigator/Victim Advocate - Emily Burtch Biweekly salary (01/01/17-6/30/17): \$2,247 x 13 pay periods x 0.75 FTE = \$21,908	\$21,908						\$21,908
Biweekly salary (07/01/17-12/31/17): \$2,609 x 13 pay periods x 0.75 FTE = \$25,438	\$25,438						\$25,438
Biweekly salary (01/01/18-08/31/18): \$2,740 x 17.5 pay periods x 0.75 FTE = \$35,963	\$35,963						\$35,963
Biweekly salary (09/01/18-12/31/18): \$2,740 x 8.6 pay periods x 0.75 FTE = \$17,673			\$17,673				\$17,673
Biweekly salary (01/01/19-08/31/19): \$2,877 x 17.4 pay periods x 0.75 FTE = \$37,544			\$37,544				\$37,544
Biweekly salary (09/01/19-12/31/19): \$2,877 x 8.7 pay periods x 0.75 FTE = \$18,772					\$18,773		\$18,773
<i>Victim Advocate Fringe Benefits: 47.8237% for P. Huynh &amp; E. Burtch</i>	\$59,750	\$26,932	\$72,023	\$7,909	\$13,811	\$7,903	\$188,328
Social Security: 6.2%							
Social Security Medicare: 1.45%							
Health Insurance: \$3,401							
Dependent Coverage: \$9,617							
Long Term Disability: 0.35%							
Retirement: 20.16%							
Unemployment Insurance: 0.27%							
Volunteer Match @ 8129 \$31.05 hourly rate x 1,552 hours = \$48,190		\$48,190					\$48,190
\$31.98 hourly rate x 1,552 hours = \$49,633				\$49,633			\$49,633
<b>Personal Section Totals</b>	<b>\$273,340</b>	<b>\$75,122</b>	<b>\$206,826</b>	<b>\$57,542</b>	<b>\$59,215</b>	<b>\$7,903</b>	<b>\$679,948</b>
<b>PERSONAL SECTION TOTAL</b>							<b>\$679,948</b>

*me*

**BUDGET CATEGORY AND LINE ITEM DATA**

Subrecipient: City & County of San Francisco				Subaward #: XE16 01 0380			
B. Operating Expenses	15 VOCA	15 VOCA MATCH	16 VOCA	16 VOCA MATCH	17 VOCA	17 VOCA MATCH	COST
Public Awareness Campaign Sing Tao Weekly Newspaper 4 full page ads x \$2,000 per ad = \$8,000 San Francisco Examiner Newspaper 4 full page ads x \$3,500 per ad = \$14,000 FM 96.1 Mandarin Radio 4 radio ads x \$1,000 per ad = \$4,000 KGO Radio 4 radio ads x \$1,000 per ad = \$4,000 Billboard 3 billboards x \$12,000 each = \$36,000 Outreach Materials 3,000 bags x \$2 per bag = \$6,000 6,102 brochures x \$2 per brochure = \$12,204	\$52,815	\$22,185	\$1,230			\$7,974	\$84,204
Contractors Graphic Designer x \$10,000 Material Translation x \$2,000	\$12,000						\$12,000
Emergency financial assistance for victims 15 victims x \$1,500 maximum = \$22,500	\$22,500						\$22,500
Travel for Project Director's Meetings Airfare: \$300 x 2 staff x 2 trips = \$1,200 Hotel: \$150 x 2 staff x 3 nights x 2 trips = \$1,800 Per diem: \$73 x 2 staff x 3 days x 1 trip = \$438 Ground transportation: \$200 x 2 staff x 2 trips = \$800 Mileage: \$0.535 x 934 miles = \$500	\$4,738						\$4,738
Rent Rent (01/01/17-8/30/18): 125 square feet x \$21/square foot x 1.75 FTE x 1.5833 yrs	\$7,273						\$7,273
Rent (09/01/18-8/30/19): 125 square feet x \$21/square foot x 1.75 FTE x 1 yr			\$4,594				\$4,594
Rent (09/01/19-12/31/19): 125 square feet x \$21/square foot x 1.75 FTE x 0.3333 yr					\$1,531		\$1,531
Indirect - 10% of minimum 10% x \$582,125 salary & fringe = \$58,212 Use for indirect - general administration, Finance, Payroll, Human Resources, Information Technology, and Executive Management	\$27,334	\$2,693	\$20,683	\$791	\$5,921	\$790	\$58,212
<b>Operating Section Totals</b>	<b>\$126,660</b>	<b>\$24,878</b>	<b>\$26,507</b>	<b>\$791</b>	<b>\$7,452</b>	<b>\$8,764</b>	<b>\$195,052</b>
<b>OPERATING SECTION TOTAL</b>							<b>\$195,052</b>

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**BUDGET CATEGORY AND LINE ITEM DETAIL**

Subrecipient: City & County of San Francisco				Subaward #: XE16 01 0380			
C. Equipment	15 VOCA	15 VOCA MATCH	16 VOCA	16 VOCA MATCH	17 VOCA	17 VOCA MATCH	COST
None requested.							\$0
<b>Equipment Section Totals</b>	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>EQUIPMENT SECTION TOTAL</b>							\$0
<b>Category Totals</b>							
<i>Same as Section 12G on the Grant Subaward Face Sheet</i>	\$400,000	\$100,000	\$233,333	\$58,333	\$66,667	\$16,667	
<b>Total Project Cost</b>							<b>\$875,000</b>

*7/12*

## VSPS Budget Summary Report

<b>XE16 Elder Abuse Program</b> San Francisco, City & County Elder Abuse Program	Subaward #: XE16 01 0380 Performance Period: 07/01/16 - 12/31/19 Latest Request: June 2017, Not Final 201
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**A. Personal Services - Salaries/Employee Benefits**

<u>F/S/L</u>	<u>Funding Source</u>	Budget Amount	Paid/Expended	Balance	Pending	Pending Balance
F	15VOCA	273,340	78,861	194,479	0	194,479
L	15VOCA	75,122	10,153	64,969	0	64,969
F	16VOCA	206,826	0	206,826	0	206,826
L	16VOCA	57,542	0	57,542	0	57,542
F	17VOCA	59,215	0	59,215	0	59,215
L	17VOCA	7,903	0	7,903	0	7,903
<b>Total A. Personal Services - Salaries/Employee Benefits:</b>		<b>679,948</b>	<b>89,014</b>	<b>590,934</b>	<b>0</b>	<b>590,934</b>

**B. Operating Expenses**

<u>F/S/L</u>	<u>Funding Source</u>	Budget Amount	Paid/Expended	Balance	Pending	Pending Balance
F	15VOCA	126,660	7,919	118,741	0	118,741
L	15VOCA	24,878	11,542	13,336	0	13,336
F	16VOCA	26,507	0	26,507	0	26,507
L	16VOCA	791	0	791	0	791
F	17VOCA	7,452	0	7,452	0	7,452
L	17VOCA	8,764	0	8,764	0	8,764
<b>Total B. Operating Expenses:</b>		<b>195,052</b>	<b>19,461</b>	<b>175,591</b>	<b>0</b>	<b>175,591</b>

**C. Equipment**

<u>F/S/L</u>	<u>Funding Source</u>	Budget Amount	Paid/Expended	Balance	Pending	Pending Balance
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F/S/L (Funding Types): F=Federal, S=State, L=Local Match

Paid/Expended=posted in ledger w/Claim Schedule, Pending=Processed, but not yet in Claim Schedule

10/09/17



**VSPS Budget Summary Report**

<b>XE16 Elder Abuse Program</b>	<b>Subaward #: XE16 01 0380</b>
<b>San Francisco, City &amp; County</b>	<b>Performance Period: 07/01/16 - 12/31/19</b>
<b>Elder Abuse Program</b>	<b>Latest Request: June 2017, Not Final 201</b>

F	15VOCA	0	0	0	0	0
L	15VOCA	0	0	0	0	0
F	16VOCA	0	0	0	0	0
L	16VOCA	0	0	0	0	0
F	17VOCA	0	0	0	0	0
L	17VOCA	0	0	0	0	0
<b>Total C. Equipment:</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

	<u>Budget Amount</u>	<u>Paid/Expended</u>	<u>Balance</u>	<u>Pending</u>	<u>Pending Balance</u>
<b>Total Local Match:</b>	<b>175,000</b>	<b>21,695</b>	<b>153,305</b>	<b>0</b>	<b>153,305</b>
<b>Total Funded:</b>	<b>700,000</b>	<b>86,780</b>	<b>613,220</b>	<b>0</b>	<b>613,220</b>
<b>Total Project Cost:</b>	<b>875,000</b>	<b>108,475</b>	<b>766,525</b>	<b>0</b>	<b>766,525</b>

F/S/L (Funding Types): F=Federal, S=State, L=Local Match

Paid/Expended=posted in ledger w/Claim Schedule. Pending=Processed, but not vet in Claim Schedule

10/09/17

**Budget Narrative**

Budget Period: 7/1/2016 – 12/31/2019 (3.5 years)

**A. PERSONAL SERVICES \$679,948**

Two victim advocates (8129 Victim Witness Investigator I) @ 1.75 FTE will be assigned to this grant and will be responsible for direct client services, day-to-day coordination with partner agencies, data tracking, trainings to community-based organizations, coordinating Division administrative functions and communications, and the completion of required program reporting. The victim advocates will also provide case management for victims served under the XE program, coordinate the multidisciplinary team that will respond to elder abuse cases, provide consultation and outreach to elders, and collect and report on data related to services provided.

Total volunteer hours of 3,104 hours will be used as an in-kind match. The total match of \$97,823 is calculated at the step 1 rate of an 8129 Victim Advocate.

Standard fringe benefits are allocated to the grant and include social security, Medicare, retirement, state unemployment compensation insurance, long-term disability, dependent coverage, and health and dental coverage for a total fringe cost of \$92,545.

**B. OPERATING EXPENSES \$195,052****Public Awareness Campaigns**

A large portion of the XE program will be to conduct outreach to the elder population regarding financial abuse and pedestrian safety. A mix of print, radio, billboards, and outreach materials will be used and is estimated at \$96,204 to include graphic designer and translation services. Brochures and re-usable bags will be used for outreach and education in

the community at in person events to be held at elder service agencies, community events and information sessions. The goal is to decrease elder pedestrian risk and increase safety.

Description	Quantity	Per unit cost	Total
Sing Tao Weekly, full page ad	4	\$2,000	\$8,000
San Francisco Examiner, ad	4	\$3,500	\$14,000
FM 96.1 Mandarin Radio, ad	4	\$1,000	\$4,000
KGO Radio, ad	4	\$1,000	\$4,000
Billboard (3 billboards @ 3 locations x 4 times)	3	\$12,000	\$36,000
Bags	3,000	\$2	\$6,000
Brochures	6,102	\$2	\$12,204
Graphic Designer	1	\$10,000	\$10,000
Translation of materials	1	\$2,000	\$2,000

The office issued a Request for Qualifications (RFQ) for *As-Needed Communications Consultant for SFDA Public Awareness Campaigns* in October 2014 and it is through this RFQ that the Graphic Designer services will be obtained.

#### Emergency Financial Assistance

Critical losses due to crime victimization will be assessed along with financial need and ability to access resources from other sources. If determined that the victim has direct crime-related losses not covered by other sources within 48 hours of the crime, the advocate will apply to for funds up to \$1,500 from the Emergency Assistance Fund to pay for items such as food, clothing, taxis, prophylactic and non-prophylactic medication, medical equipment, health care items including glasses, dentures, hearing aids, and other items as need. The Emergency Financial Assistance fund is budgeted at \$1,500 per victim x 15 victims for a total cost of \$22,500.

Travel

The mandatory Project Director's meeting and other travel and training is budgeted at \$4,738.

Airfare:  $\$300 \times 2 \text{ staff} \times 2 \text{ trips} = \$1,200$

Hotel:  $\$150 \times 2 \text{ staff} \times 3 \text{ nights} \times 2 \text{ trips} = \$1,800$

Per diem:  $\$73 \times 2 \text{ staff} \times 3 \text{ days} \times 1 = \$438$

Ground transportation:  $\$200 \times 2 \text{ staff} \times 2 \text{ trips} = \$800$

Mileage:  $\$0.535 \times 934 \text{ miles} = \$500$

Rent

Total rent of \$13,398 is calculated on 125 square feet at \$21/square foot per FTE.

For 01/01/17-8/30/18:  $125 \text{ square feet} \times \$21/\text{square foot} \times 1.75 \text{ FTE} \times 1.5833 \text{ yrs.} = \$7,273$

For 09/01/18-8/30/19:  $125 \text{ square feet} \times \$21/\text{square foot} \times 1.75 \text{ FTE} \times 1 \text{ yr.} = \$4,594$

For 09/01/19-12/31/19:  $125 \text{ square feet} \times \$21/\text{square foot} \times 1.75 \text{ FTE} \times 0.333 \text{ yr.} = \$1,531$

Indirect

Indirect costs are budgeted at 10% of salaries and fringe. Indirect costs are not directly attributable to any one program and include, but not limited to, general administration, Finance, Payroll, Human Resources, Information Technology, and Executive Management.

$10\% \text{ de Minimis} \times \$582,125 \text{ salary \& fringe} = \$58,212$

**C. EQUIPMENT**

No equipment is budgeted for the grant period.

## PROJECT SUMMARY

<b>1. Subaward #:</b> XE16-01-0380	<b>3. PERFORMANCE PERIOD</b> 07/01/2016 to 12/31/2019
<b>2. PROJECT TITLE</b> Elder Abuse (XE) Program	
<b>4. SUBRECIPIENT</b> Name: City & County of San Francisco Phone: 415-734-3359 Address: 850 Bryant Street, Room 322 Fax #: 415-553-1034 City: San Francisco Zip: 94103-4600	<b>5. GRANT AMOUNT</b> (this is the same amount as 12G of the Grant Subaward Face Sheet) \$ 875,000

### 6. IMPLEMENTING AGENCY

Name: District Attorney's Office/Victim Services Div. Phone: 415-553-9044 Fax #: 415-553-1034  
Address: 850 Bryant Street, Room 320 City: San Francisco Zip: 94103

### 7. PROGRAM DESCRIPTION

The Elder Abuse Program (EAP) is housed within the San Francisco District Attorney's Office (SFDA), Victim Services Division. The EAP staff has an impressive track record of addressing the needs of senior victims of violent crime and working closely with public safety and community-based partners. Elder abuse victims receive streamlined services from initial referral through case adjudication, closure, and beyond; and benefit from the policy advocacy activities of the EAP.

### 8. PROBLEM STATEMENT

Francisco has one of the highest concentrations of seniors living independently, and is home to an increasingly aging population. In fact, according to the 2010 Census, 14% (or 112,833) of San Francisco's population is 65 or older and is expected to grow by 100% by the year 2020. These older adults include a high concentration of non-English speaking seniors (over half of reported San Francisco elder abuse victims are minorities and almost one-third are non-English speaking), LGBT seniors, and a higher than average percentage of individuals with disabilities, 44% of whom are non-institutionalized disabled. San Francisco has a diverse elder population, and this diversity means we have diverse needs that can pose challenges in service delivery. In 2015, the Elder Abuse Program (EAP) served 311 victims of crime over the age of 60.

### 9. OBJECTIVES

1. Direct Services.
2. Outreach and Public Awareness Campaign
3. Training: Elder abuse and criminal justice system education. Cr
4. Community Coordination: Strategic Collaboration and Coordination with Public Safety and other Partners.

**10. ACTIVITIES**

Crisis Intervention Counseling, Criminal Justice Advocacy, Assistance Impact Statements, Crime Victim Compensation Benefits, Emergency Assistance, Referrals, Outreach to Seniors, Training to Providers, Community Events, Public Awareness Campaigns About Pedestrian Safety

**11. EVALUATION** (if applicable)

**12. NUMBER OF CLIENTS**

(if applicable)

75 per year with direct services and 1,500 per year with outreach campaigns

**13. PROJECT BUDGET**

(these are the same amounts as on Budget Pages)

	Personal Services	Operating Expenses	Equipment	TOTAL	
15 VOCA	\$273,340 <del>\$679,948</del>	\$126,060 <del>\$195,052</del>	Ø	\$400,000 <del>\$875,000</del>	DN
15 VOCA MATCH	\$75,122	\$24,878	Ø	\$100,000 <del>\$0</del>	DN
16 VOCA	\$206,826	\$26,507	Ø	\$233,333 <del>\$0</del>	DN
16 VOCA MATCH	\$57,542	\$791	Ø	\$58,333 <del>\$0</del>	DN
17 VOCA	\$59,215	\$7,452	Ø	\$66,667 <del>\$0</del>	DN
17 VOCA MATCH	\$7,903	\$8,764	Ø	\$16,667 <del>\$0</del>	DN
<b>Totals:</b>	\$679,948	\$195,052	\$0	\$875,000	

**TO:** Angela Calvillo, Clerk of the Board of Supervisors  
**FROM:** Lorna Garrido, Grants and Contracts Manager  
**DATE:** March 6, 2018  
**SUBJECT:** Accept and Expend Resolution for Subject Grant  
**GRANT TITLE:** Elder Abuse Program

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Attached please find the original\* and 1 copy of each of the following:

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

**Special Timeline Requirements:**

Please schedule at the earliest available date.

**Departmental representative to receive a copy of the adopted resolution:**

Name: Lorna Garrido

Phone: (415) 553-9258

Interoffice Mail Address: DAT, 850 Bryant Street, Room 322

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).

Print Form

# Introduction Form

RECEIVED  
BOARD OF SUPERVISORS  
SAN FRANCISCO

By a Member of the Board of Supervisors or the Mayor

2018 APR -3 PM 4:46

Time stamp  
or meeting date

BY \_\_\_\_\_

I hereby submit the following item for introduction (select only one):

- 1. For reference to Committee. (An Ordinance, Resolution, Motion, or Charter Amendment)
- 2. Request for next printed agenda Without Reference to Committee.
- 3. Request for hearing on a subject matter at Committee.
- 4. Request for letter beginning "Supervisor [ ] inquires"
- 5. City Attorney request.
- 6. Call File No. [ ] from Committee.
- 7. Budget Analyst request (attach written motion).
- 8. Substitute Legislation File No. [ ]
- 9. Reactivate File No. [ ]
- 10. Question(s) submitted for Mayoral Appearance before the BOS on [ ]

Please check the appropriate boxes. The proposed legislation should be forwarded to the following:

- Small Business Commission       Youth Commission       Ethics Commission
- Planning Commission       Building Inspection Commission

**Note: For the Imperative Agenda (a resolution not on the printed agenda), use a Imperative Form.**

**Sponsor(s):**

Tang

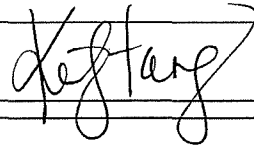
**Subject:**

Accept and Expend Grant - California Governor's Office of Emergency Services, Elder Abuse Program - \$700,000

**The text is listed below or attached:**

[ ]

Signature of Sponsoring Supervisor: \_\_\_\_\_



**For Clerk's Use Only:**