

## London N. Breed Mayor

TO:		Angela Calvillo, Clerk of the Board of Supervisors		
FROM:		Dr. Grant Colfax Director of Health		
DATE:		2/9/2021		
SUBJECT:		Grant Accept and Expend		
GRANT TITLE:		Accept and Expend Grant - Tobacco Grant Program Award - \$1,780,842		
Attached please find the original and 1 copy of each of the following:				
$\boxtimes$	Proposed g	grant resolution, original signed by Department		
$\boxtimes$	Grant inform	rmation form, including disability checklist -		
$\boxtimes$	Budget and Budget Justification			
$\boxtimes$	Grant applic	ant application		
$\boxtimes$	Agreement	Agreement / Award Letter		
	Other (Expl	ther (Explain):		
Special Timeline Requirements:				
Departmental representative to receive a copy of the adopted resolution:				
Name: Gregory Wong (greg.wong@sfdph.org) Phone: 554-2521			Phone: 554-2521	
Interoffice Mail Address: Dept. of Public Health, 101 Grove St # 108				
Certified copy required Yes ☐ No ⊠			No 🖂	