AGENDA ITEM INFORMATION SHEET

SUBJECT: ADDRESSING THE NEEDS OF COMMUNITY ASSISTANCE RE		D HOMELESSNESS POPULATIONS: SUPPORT FOR POWERMENT COURT
REQUIRES FOUR VOTES:	Yes No v	
WRITTEN DISCLOSURE PER	COUNTY CHART Yes No	ER SECTION 1000.1 REQUIRED
PREVIOUS RELEVANT BOARD ACTIONS: N/A		
BOARD POLICIES APPLICAE N/A	BLE:	
BOARD POLICY STATEMENT N/A	ΓS:	
MANDATORY COMPLIANCE N/A	:	
ORACLE AWARD NUMBER(S	S) AND CONTRAC	Γ AND/OR REQUISITION NUMBER(S):
ORIGINATING DEPARTMEN Fourth and First Supervisorial Dist		
OTHER CONCURRENCE(S): N/A		
INTERNAL REVIEW COMPLI	ETE BY:	
CONTACT PERSON(S):		Signature
Name 619.515.6989		Name 619.531.5664
Phone joshuad.bohannan@sdcounty.ca.go	OV	Phone kate.nyce@sdcounty.ca.gov
E-mail		E-mail