## CAL-OAR REPORT SIGNATURE

For submittal of	of:	☑Cal-SIP ☐Cal-SIP Progress Report	
County	County of	County of Fresno	
Submission Date	**************************************		
Cal-CQI Cycle	2021-202	2021-2026 Cycle	
County Welfare Di	rector		
Name	Sanja Bu	Sanja Bugay	
Signature:	fy	fep L	
Phone Number	559-600	559-600-2301	
Board of Superviso	ors (BOS) Represe	entative Signature – For Cal-SIP Approval Only	
BOS Approval Date	10-2	14-2023	
Name	Sal Quint	Sal Quintero	
Title/Position	Chairman	Chairman of the Board of Supervisors of the County of Fresno	
Signature	81	duituro	
	0		
	Conta	act Information	
County Cal-OAR	Name and Title	Fasil Tilahun, Program Supervisor	
Contact	Phone & E-mail	ftilahun@fresnocountyca.gov	

Sign, scan, and submit the Signature Sheet along with the Cal-OAR Report to your county's SFT site.

ATTEST:

BERNICE E. SEIDEL

Clerk of the Board of Supervisors County of Fresno, State of California

By Haname Deputy