

TRANSMITTAL LETTER
2024-2028 Four Year Area Plan/ Annual Update
Check one: ☐ **FY 24-25** ☒ **FY 25-26** ☐ **FY 26-27** ☐ **FY 27-28**

AAA Name: San Mateo County Aging and Disability Services

PSA 8

This Area Plan is hereby submitted to the California Department of Aging for approval. The Governing Board and the Advisory Council have each had the opportunity to participate in the planning process and to review and comment on the Area Plan. The Governing Board, Advisory Council, and Area Agency Director actively support the planning and development of community-based systems of care and will ensure compliance with the assurances set forth in this Area Plan. The undersigned recognize the responsibility within each community to establish systems in order to address the care needs of older individuals and their family caregivers in this planning and service area.

1. _____
(David Canepa)

Signature: Governing Board Chair ¹
President, Board of Supervisors

Date

2. _____
(Monika Lee)

Signature: Advisory Council Chair

Date

3. _____
(Lee Pullen)

Signature: Area Agency Director

Date