

**FORM SFEC-126:  
NOTIFICATION OF CONTRACT APPROVAL**  
(S.F. Campaign and Governmental Conduct Code § 1.126)

<b>City Elective Officer Information</b> <i>(Please print clearly.)</i>	
Name of City elective officer(s):  Members, San Francisco Board of Supervisors	City elective office(s) held:  Members, San Francisco Board of Supervisors

<b>Contractor Information</b> <i>(Please print clearly.)</i>	
Name of contractor: <b>Bayview Hunters Point Foundation</b>	
<i>Please list the names of (1) members of the contractor's board of directors; (2) the contractor's chief executive officer, chief financial officer and chief operating officer; (3) any person who has an ownership of 20 percent or more in the contractor; (4) any subcontractor listed in the bid or contract; and (5) any political committee sponsored or controlled by the contractor. Use additional pages as necessary.</i> (1) James Kendrix, Board President; Shirley Jones, Board Vice President; Deanna Abma, Board Secretary; Susan Watson, Board Treasurer; Erma Cobb, Board Member; Claude Everhart, Board Member; Wayzel Fuller, Board Member; Ronald Person, Board Member; (2) Lillian Kim Shine, Chief Executive Officer; Al Middlebrooks, Chief Financial Officer; Lillian Kim Shine, Chief Operating Officer; (3) N/A; (4) N/A; (5) N/A	
Contractor address: <b>150 Executive Park Blvd, Suite 2800, San Francisco, CA 94134</b>	
Date that contract was approved:	Amount of contract: <b>\$41,649,706</b>
Describe the nature of the contract that was approved: <b>Mental Health and Substance Abuse Services</b>	
Comments:	

This contract was approved by (check applicable):

- the City elective officer(s) identified on this form
- a board on which the City elective officer(s) serves San Francisco Board of Supervisors  
Print Name of Board
- the board of a state agency (Health Authority, Housing Authority Commission, Industrial Development Authority Board, Parking Authority, Redevelopment Agency Commission, Relocation Appeals Board, Treasure Island Development Authority) on which an appointee of the City elective officer(s) identified on this form sits

Print Name of Board

<b>Filer Information</b> <i>(Please print clearly.)</i>	
Name of filer: Angela Calvillo, Clerk of the Board	Contact telephone number: ( 415 ) 554-5184
Address: City Hall, Room 244. 1 Dr. Carlton B. Goodlett Pl., San Francisco, CA 94102	E-mail: Board.of.Supervisors@sfgov.org

\_\_\_\_\_  
Signature of City Elective Officer (if submitted by City elective officer)

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Signature of Board Secretary or Clerk (if submitted by Board Secretary or Clerk)

\_\_\_\_\_  
Date Signed