



San Francisco Ethics Commission

25 Van Ness Avenue, Suite 220, San Francisco, CA 94102
 Phone: 415.252.3100 . Fax: 415.252.3112
ethics.commission@sfgov.org . www.sfethics.org

Received On:

210768

File #:

Bid/RFP #:

Notification of Contract Approval

SFEC Form 126(f)4

(S.F. Campaign and Governmental Conduct Code § 1.126(f)4)
 A Public Document

Each City elective officer who approves a contract that has a total anticipated or actual value of \$100,000 or more must file this form with the Ethics Commission within five business days of approval by: (a) the City elective officer, (b) any board on which the City elective officer serves, or (c) the board of any state agency on which an appointee of the City elective officer serves. For more information, see: <https://sfethics.org/compliance/city-officers/contract-approval-city-officers>

1. FILING INFORMATION

TYPE OF FILING	DATE OF ORIGINAL FILING <i>(for amendment only)</i>
Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	(415) 701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
Asian, Inc	415-928-5910	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
1167 Mission Street, 4th Floor, San Francisco, CA 9410	1heystek@asianinc.org	

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		210768
DESCRIPTION OF AMOUNT OF CONTRACT		
\$38,869		
NATURE OF THE CONTRACT (Please describe)		
CDBG grant for technical assistance for multilingual small businesses and microenterprises.		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Fung	Frank	Board of Directors
2	Lo	Robert	Board of Directors
3	Ciu	Christina	Board of Directors
4	Lem	Betty	Board of Directors
5	Bryan	Aubri	Board of Directors
6	Han	Yihou	Board of Directors
7	Leong	Jonathan	Board of Directors
8	Royse	Roger	Board of Directors
9	Heystek	Lamar	CEO
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



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OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	(415) 701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
Bay Area Community Resources	415-444-5580
STREET ADDRESS (including City, State and Zip Code)	EMAIL
171 Carlos Drive, San Rafael, CA 94903	mweinstein@bacr.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		210768
DESCRIPTION OF AMOUNT OF CONTRACT		
\$100,000		
NATURE OF THE CONTRACT (Please describe)		
CDBG grant for Portola San Bruno Avenue commercial corridor revitalization		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Franklin	Lisa	Board of Directors
2	Breckenridge	Bryan	Board of Directors
3	Vaughan	Monica	Board of Directors
4	McEvers Anderson	Nancy	Board of Directors
5	Travers	Bud	Board of Directors
6	Ness	Rob	Board of Directors
7	Davisson	Roberty	Board of Directors
8	Wu	Sinclair	Board of Directors
9	Moses	Omolade	Board of Directors
10	Weinstein	Martin	CEO
11	Williams	Mary Jo	COO
12	Campbell	Cathleen	CFO
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I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

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Board of Supervisors	Members

3. FILER'S CONTACT	
NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT	
NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	(415) 701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR		TELEPHONE NUMBER
Bayview Hunters Point Multipurpose Senior Services, Inc		(415) 822-1444
STREET ADDRESS (including City, State and Zip Code)		EMAIL
1753 Carroll Avenue, San Francisco, CA 94124		cathy.davis@bhpms.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		210768
DESCRIPTION OF AMOUNT OF CONTRACT		
\$202,000		
NATURE OF THE CONTRACT (Please describe)		
CDBG grant for housing stabilization services and short-term case management, primarily for residents of Alice Griffith.		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Hall	Marvin	Board of Directors
2	Churchwell	Ceasar	Board of Directors
3	Richardson	Linda	Board of Directors
4	Hastings	Sammy	Board of Directors
5	Henderson	Paul	Board of Directors
6	Tugbenyoh	Mawuli	Board of Directors
7	Elias-Jaskson	Jo	Board of Directors
8	Osby-Bell	Jeanne	Board of Directors
9	James	Oscar	Board of Directors
10	Davis	Cathy	CEO
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10. VERIFICATION

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SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
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2. CITY ELECTIVE OFFICE OR BOARD	
OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT	
NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Legislative Clerks Division	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT	
NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	(415) 701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
YMCA of San Francisco (Bayview Branch)	415-822-7728	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
50 California Street, San Francisco, CA 94111	aparker@ymcasf.org	

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		210768
DESCRIPTION OF AMOUNT OF CONTRACT		
\$413,521		
NATURE OF THE CONTRACT (Please describe)		
<p>\$313,521 in CDBG grant for Community engagement and service connection, primarily for residents of Hunters View and Sunnydale-Velasco.</p> <p>\$100,000 in CDBG grant to provide individualized employment services and career/educational exploration to young adults.</p>		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
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9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Baker	John	Board of Directors
2	Bunim	Lynn	Board of Directors
3	Rose	Nancy	Board of Directors
4	Theophilos	Patricia	Board of Directors
5	Wellborn	Caryl	Board of Directors
6	Patz	Christopher	Board of Directors
7	Millman	Michael	Board of Directors
8	Morrison	Ann	Board of Directors
9	Susko	Peter	Board of Directors
10	Teague	Gary	Board of Directors
11	Willingham	John	Board of Directors
12	Wong	Penelope	Board of Directors
13	Yopes	Eric	Board of Directors
14	Zimmer	Thomas	Board of Directors
15	Lee	Theodora	Board of Directors
16	Kearny	Thomas	Board of Directors
17	Kay	Kathleen	Board of Directors
18	Howard	Gretchen	Board of Directors
19	Hankins	Stephen	Board of Directors

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
20	Farrell	Glenn	Board of Directors
21	Eberly	Jon	Board of Directors
22	Collins	Charles	Board of Directors
23	Berg	John	Board of Directors
24	Tacing	Parker	CEO
25	Bruning-Miles	Jamie	COO
26	Cheng	Kathy	CFO
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Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

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Dolly Sithounnolat	(415) 701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@gmail.com

5. CONTRACTOR		
NAME OF CONTRACTOR		TELEPHONE NUMBER
Causa Justa :: Just Cause		510-763-5877
STREET ADDRESS (including City, State and Zip Code)		EMAIL
1419 34th Ave., #203, Oakland, CA 94601		shaketa@cjjc.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		210768
DESCRIPTION OF AMOUNT OF CONTRACT		
\$558,450		
NATURE OF THE CONTRACT (Please describe)		
CDBG grant for tenant counseling and education, primarily for Latinx residents citywide.		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
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1	Lee	NTanya	Board of Directors
2	Gold	Adam	Board of Directors
3	Foy	Michelle	Board of Directors
4	Guzman	Laura	Board of Directors
5	Guillen	Maria	Board of Directors
6	Quint	Maisha	Board of Directors
7	Aubry	Ja'Nai	Board of Directors
8	Redden	Shaketa	CEO
9	Cashmore	Kristen	COO
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



San Francisco Ethics Commission

25 Van Ness Avenue, Suite 220, San Francisco, CA 94102
 Phone: 415.252.3100 . Fax: 415.252.3112
ethics.commission@sfgov.org . www.sfethics.org

Received On:

210768

File #:

Bid/RFP #:

Notification of Contract Approval

SFEC Form 126(f)4

(S.F. Campaign and Governmental Conduct Code § 1.126(f)4)
 A Public Document

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1. FILING INFORMATION

TYPE OF FILING	DATE OF ORIGINAL FILING <i>(for amendment only)</i>
Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	(415) 701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
Central City Hospitality House	(415) 749-2100	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
290 Turk Street, San Francisco, CA 94102	jwilson@hospitalityhouse.org	

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		210768
DESCRIPTION OF AMOUNT OF CONTRACT		
\$408,000		
NATURE OF THE CONTRACT (Please describe)		
<p>\$73,000 ESG grant for case management for shelter residents. \$335,000 CDBG grant to provide individualized employment services to Bayview/Hunters Point residents.</p>		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Bunker	Jeanie	Board of Directors
2	Rocchio	Maria	Board of Directors
3	Hampton	Michael	Board of Directors
4	Johnson	Jesse	Board of Directors
5	Zmuda	Monique	Board of Directors
6	Cutler	Kelly	Board of Directors
7	Go	Elaine	Board of Directors
8	Quinn	Dana Isaac	Board of Directors
9	D'Orazio	Marissa	Board of Directors
10	Boden	Paul	Board of Directors
11	Cavalex	Amber	Board of Directors
12	Wilson	Joseph	CEO
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9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



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1. FILING INFORMATION

TYPE OF FILING	DATE OF ORIGINAL FILING <i>(for amendment only)</i>
Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	(415) 701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Children's Council of San Francisco	TELEPHONE NUMBER 415-276-2900
STREET ADDRESS (including City, State and Zip Code) 445 Church Street, San Francisco, CA 94114	EMAIL gfromer@childrenscouncil.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 210768
DESCRIPTION OF AMOUNT OF CONTRACT \$55,000		
NATURE OF THE CONTRACT (Please describe) CDBG grant for technical assistance in Spanish for home-based childcare microentrepreneurs.		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Nordberg	Anna	Board of Directors
2	Sims	Deborah	Board of Directors
3	Dusedau	Marga	Board of Directors
4	Chang	Shara	Board of Directors
5	Butler	Omar	Board of Directors
6	Diana	Elisabeth	Board of Directors
7	Fram	Victoria	Board of Directors
8	Hilberman	Jessica	Board of Directors
9	Hood	Sophie	Board of Directors
10	Israel	George	Board of Directors
11	Kirk	Jim	Board of Directors
12	Mondry	Gale	Board of Directors
13	Moore	Fatima	Board of Directors
14	Page	Farris	Board of Directors
15	Rosberg	Christ	Board of Directors
16	Thomas	Chris	Board of Directors
17	Vause	Brandy	Board of Directors
18	Fromer	Gina	CEO
19	Fischer	Eric	CFO

9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



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1. FILING INFORMATION

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AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	(415) 701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR Chinatown Community Development Center, Inc.		TELEPHONE NUMBER 415-984-1450
STREET ADDRESS (including City, State and Zip Code) 1525 Grant Avenue, San Francisco, CA 94133		EMAIL myeung@chinatowncdc.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 210768
DESCRIPTION OF AMOUNT OF CONTRACT \$148,750		
NATURE OF THE CONTRACT (Please describe) CDBG grant for service connection, primarily for API residents of single room occupancy hotels (SROs) in Chinatown		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Chin	Jane	Board of Directors
2	Quock	Lindsey	Board of Directors
3	Zoubi	Fady	Board of Directors
4	Nguyen	James	Board of Directors
5	Cheng	Claudine	Board of Directors
6	Cordero	Terence	Board of Directors
7	Craig	Cathy	Board of Directors
8	Fagler	Jim	Board of Directors
9	Hilton	Irene	Board of Directors
10	Jew	Clayton	Board of Directors
11	Leadbetter	Julie	Board of Directors
12	Lee	Olsen	Board of Directors
13	Lim	Aaron	Board of Directors
14	Lin	Barbara	Board of Directors
15	Lin	Wendell	Board of Directors
16	Poe	Irma	Board of Directors
17	Rosenquest	Nils	Board of Directors
18	Ruiz	Sam	Board of Directors
19	Tse	Nigel	Board of Directors

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
20	Wong	Susie	Board of Directors
21	Zhang	Mary	Board of Directors
22	Yeung	Malcolm	CEO
23	Jones	Whitney	COO
24	Gansen	Karen	CFO
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9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

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I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



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1. FILING INFORMATION

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Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	(415) 701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
YMCA of San Francisco (Chinatown Branch)	415-576-9622	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
50 California St, Suite 650, San Francisco, CA 94111	klee@ymcasf.org	

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		210768
DESCRIPTION OF AMOUNT OF CONTRACT		
\$259,352		
NATURE OF THE CONTRACT (Please describe)		
<p>\$212,000 CDBG grant for Skill building, ESL training and service connection, primarily for API residents of Chinatown.</p> <p>\$47,352 CDBG grant for Community engagement and service connection, primarily for API families in single room occupancy hotels (SROs) in Chinatown.</p>		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Fong	Michelle	Board of Directors
2	Mar	Jason	Board of Directors
3	Toothman	Pauline	Board of Directors
4	Lau	Gabe	Board of Directors
5	Jew	Eric	Board of Directors
6	Fong	Hanley	Board of Directors
7	Louie	Harvey	Board of Directors
8	Pham	Young	Board of Directors
9	Lee	Kari	CEO
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9. AFFILIATES AND SUBCONTRACTORS

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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

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SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK BOS Clerk of the Board	DATE SIGNED
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OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	(415) 701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
Chinese for Affirmative Action	415-274-6750	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
17 Walter U. Lum Place, San Francisco, CA 94108	vpan@caASF.org	

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		210768
DESCRIPTION OF AMOUNT OF CONTRACT		
\$100,000		
NATURE OF THE CONTRACT (Please describe)		
CDBG grant for individualized culturally competent employment services to the AAPI community.		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Lee	Celia	Board of Directors
2	Wong	Victoria	Board of Directors
3	Chang	Jeff	Board of Directors
4	Lee	Daniel	Board of Directors
5	Lee	Lisa	Board of Directors
6	Wong	Germaine	Board of Directors
7	Kunishima	Jill	Board of Directors
8	Moore	Kosheno	Board of Directors
9	Yee	Brian	Board of Directors
10	Pan	Vincent	CEO
11	Fong	John	CFO
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9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



San Francisco Ethics Commission

25 Van Ness Avenue, Suite 220, San Francisco, CA 94102
 Phone: 415.252.3100 . Fax: 415.252.3112
ethics.commission@sfgov.org . www.sfethics.org

Received On:

210768

File #:

Bid/RFP #:

Notification of Contract Approval

SFEC Form 126(f)4

(S.F. Campaign and Governmental Conduct Code § 1.126(f)4)
 A Public Document

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1. FILING INFORMATION

TYPE OF FILING	DATE OF ORIGINAL FILING <i>(for amendment only)</i>
Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	(415) 701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
Collective Impact	415-567-0400	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
PO Box 156853, San Francisco CA 94115	James@collectiveimpact.org	

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		210768
DESCRIPTION OF AMOUNT OF CONTRACT		
\$100,000		
NATURE OF THE CONTRACT (Please describe)		
CDBG grants for To provide individualized employment services and career/educational exploration to young adults.		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Mahoney	Jennifer	Board of Directors
2	Allick	Paul	Board of Directors
3	Aranoff	Alexandria	Board of Directors
4	Davis	Sheryl	Board of Directors
5	Piccini	Jacqueline	Board of Directors
6	White	Monetta	Board of Directors
7	Bolmeier-Fisher	Nancy	Board of Directors
8	Spingola	James	CEO
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

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I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



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1. FILING INFORMATION

TYPE OF FILING	DATE OF ORIGINAL FILING <i>(for amendment only)</i>
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AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	(415) 701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Community Vision Capital & Consulting	TELEPHONE NUMBER 415-392-8215
STREET ADDRESS (including City, State and Zip Code) 870 Market Street, San Francisco, CA 94102	EMAIL choward@communityvisionca.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 210768
DESCRIPTION OF AMOUNT OF CONTRACT \$31,499		
NATURE OF THE CONTRACT (Please describe) CDBG grant for organizational capacity building		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	GoPaul	Patricia	Board of Directors
2	Snyder	Jim	Board of Directors
3	Elssaeser	David	Board of Directors
4	Addison	Anita	Board of Directors
5	Johnson	Carolyn	Board of Directors
6	Merchant	Pamela	Board of Directors
7	Madeira	Andy	Board of Directors
8	Chan	John	Board of Directors
9	Medina	Luisa	Board of Directors
10	Ignozzi	Bryan	Board of Directors
11	Catherine	Howard	CEO
12	Salem	C. Lea	CFO
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK BOS Clerk of the Board	DATE SIGNED
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2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	(415) 701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Episcopal Community Services of San Francisco	TELEPHONE NUMBER (415) 487-3300
STREET ADDRESS (including City, State and Zip Code) 165 8th Street, 3rd Floor, San Francisco, CA 94103	EMAIL bstokes@ecs-sf.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 210768
DESCRIPTION OF AMOUNT OF CONTRACT \$206,943		
NATURE OF THE CONTRACT (Please describe) \$89,000 ESG grant for emergency shelter services \$53,943 ESG grant for rapid re-housing for adults \$64,000 CDBG grant for skill building, primarily for homeless residents of District 6		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Tatsuno	Yvonne	Board of Directors
2	Clark-King	Rev. Ellen	Board of Directors
3	Clayter	Todd	Board of Directors
4	Geeslin	Keith	Board of Directors
5	Gill	Richard	Board of Directors
6	Dienst	Sedge	Board of Directors
7	Jones	Martin	Board of Directors
8	Knapp	Frederic	Board of Directors
9	Mouton-Patterson	Rita	Board of Directors
10	Ktcham	Susan	Board of Directors
11	Robershottte	Megan	Board of Directors
12	Singer, PHD	Rev Sussanna	Board of Directors
13	Springwater	Richard	Board of Directors
14	Todd	Kirby Brooks	Board of Directors
15	Zaidi	S. Hassan	Board of Directors
16	Andrus	Rev. Marc Handley	Board of Directors
17	Stokes	Beth	CEO
18	Callandrillo	Christopher	COO
19	Larra	Eric	CFO

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

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I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



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1. FILING INFORMATION

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Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	(415) 701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
Eviction Defense Collaborative, Inc.	415-947-0797	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
1338 Mission Street, 4th Floor, San Francisco, CA 9410	martinac@evictiondefense.org	

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		210768
DESCRIPTION OF AMOUNT OF CONTRACT		
\$1,014,169		
NATURE OF THE CONTRACT (Please describe)		
CDBG grant for Tenant Right to Counsel partners providing full-scope legal representation for residents facing eviction		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Wolford	Jason	Board of Directors
2	Zadmehran	Sacha	Board of Directors
3	Gibson	Shirley	Board of Directors
4	Wright	Greg	Board of Directors
5	Alioto	Josephine	Board of Directors
6	Poland	Matt	Board of Directors
7	Cucullu Lim	Martina	CEO
8	Kislyuk	Yev	CFO
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BOS Clerk of the Board	



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2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	(415) 701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR		TELEPHONE NUMBER
Excelsior Action Group		415-917-3324
STREET ADDRESS (including City, State and Zip Code)		EMAIL
35 San Juan Avenue, San Francisco, CA 94112		mflores@eagsf.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		210768
DESCRIPTION OF AMOUNT OF CONTRACT		
\$100,000		
NATURE OF THE CONTRACT (Please describe)		
CDBG grant for Excelsior commercial corridor revitalization		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Mulkey Meyer	Cathy	Board of Directors
2	Litehiser	Joe	Board of Directors
3	D'Anca	Grace	Board of Directors
4	D'Avirro	Linda	Board of Directors
5	Harris	Mary	Board of Directors
6	Harris	Al	Board of Directors
7	Koide	Summer	Board of Directors
8	Macapagal	Rena	Board of Directors
9	Zvanski	Claire	Board of Directors
10	Flores	Mel	CEO
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9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



San Francisco Ethics Commission

25 Van Ness Avenue, Suite 220, San Francisco, CA 94102
 Phone: 415.252.3100 . Fax: 415.252.3112
ethics.commission@sfgov.org . www.sfethics.org

Received On:

210768

File #:

Bid/RFP #:

Notification of Contract Approval

SFEC Form 126(f)4

(S.F. Campaign and Governmental Conduct Code § 1.126(f)4)
 A Public Document

Each City elective officer who approves a contract that has a total anticipated or actual value of \$100,000 or more must file this form with the Ethics Commission within five business days of approval by: (a) the City elective officer, (b) any board on which the City elective officer serves, or (c) the board of any state agency on which an appointee of the City elective officer serves. For more information, see: <https://sfethics.org/compliance/city-officers/contract-approval-city-officers>

1. FILING INFORMATION

TYPE OF FILING	DATE OF ORIGINAL FILING <i>(for amendment only)</i>
Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	415-701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
Good Samaritan Family Resource Center of San Francisco	415-401-4253	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
1294 Potrero Avenue, San Francisco, CA 94110	mariopaz@goodsamfrc.org	

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		210768
DESCRIPTION OF AMOUNT OF CONTRACT		
\$52,000		
NATURE OF THE CONTRACT (Please describe)		
CDBG grant for ESL training, primarily for Latinx immigrant residents of the Mission		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Arias	Ximena	Board of Directors
2	Ausman	Bao-Tran	Board of Directors
3	Bryant	Rev. Dr. Joseph Jr.	Board of Directors
4	Chen	Rosalyn	Board of Directors
5	De Rosa	Frank	Board of Directors
6	Hernandez	Bob	Board of Directors
7	Taylor	Kate	Board of Directors
8	Vargas	Mary L.	Board of Directors
9	Vivanco	Sandra	Board of Directors
10	Yu	Charmaine	Board of Directors
11	Susser	Rebecca	Board of Directors
12	Thornley	Douglas	Board of Directors
13	Drego	Vidya	Board of Directors
14	Lopez	Vangie	Board of Directors
15	Paz	Mario	CEO
16	Dominguez	Julieta	COO
17	Matchett	David	CFO
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9. AFFILIATES AND SUBCONTRACTORS

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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

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AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	415-701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
Gum Moon Residence Hall	415-788-1008	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
940 Washington Street, San Francisco, CA 94108	awrcgloria@pacbell.net	

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		210768
DESCRIPTION OF AMOUNT OF CONTRACT		
\$79,915		
NATURE OF THE CONTRACT (Please describe)		
CDBG grant for skill building and service connection, primarily for API residents citywide		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Soo	Selina	Board of Directors
2	Eichey-Brown	Nina	Board of Directors
3	Chan	Darius	Board of Directors
4	Cheng	Pa	Board of Directors
5	Davis	Winna	Board of Directors
6	Fong	Derek	Board of Directors
7	Fung	Grace	Board of Directors
8	Goetze	Peter	Board of Directors
9	Kim	Katherine	Board of Directors
10	Li	Mina	Board of Directors
11	Lieu	Adrienne	Board of Directors
12	Lock	Bill	Board of Directors
13	Ma	Jackie	Board of Directors
14	Mah	Michele	Board of Directors
15	Mak	George	Board of Directors
16	Richardson	Kathy	Board of Directors
17	Traub	Cynthia	Board of Directors
18	Lee	Clarissa	Board of Directors
19	Tan	Gloria	CEO

9. AFFILIATES AND SUBCONTRACTORS

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Incomplete - Pending Signature

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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



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1. FILING INFORMATION

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2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	415-701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
Homebridge, Inc.	415-659-5329	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
1035 Market Street L1, San Francisco CA 94103	mburns@homebridgeca.org	

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		210768
DESCRIPTION OF AMOUNT OF CONTRACT		
\$200,000		
NATURE OF THE CONTRACT (Please describe)		
CDBG grant clinical health care training (personal care giver) as well as skills advancement training for local residents and the existing workforce.		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Sedlander	John	Board of Directors
2	Kaplan	Gay	Board of Directors
3	Pitt	Jessica	Board of Directors
4	Murphy	Clare	Board of Directors
5	Malakoff	Forrest	Board of Directors
6	Nadel	Ross	Board of Directors
7	Carlson	Robert	Board of Directors
8	Barnes	Derek	Board of Directors
9	Morrison	Artrese	Board of Directors
10	Levy	Rick	Board of Directors
11	Burns	Mark	CEO
12	Pitchford	Simon	COO
13	Weingand	Shantel	CFO
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9. AFFILIATES AND SUBCONTRACTORS

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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

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I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

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BOS Clerk of the Board	



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1. FILING INFORMATION

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Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	415-701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR La Cocina, Inc.	TELEPHONE NUMBER 415-824-2729
STREET ADDRESS (including City, State and Zip Code) 2948 Folsom Street, San Francisco, CA 94110	EMAIL caleb@lacocinasf.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 210768
DESCRIPTION OF AMOUNT OF CONTRACT \$70,000		
NATURE OF THE CONTRACT (Please describe) CDBG grant for kitchen incubator and technical assistance for food-based microentrepreneurs		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Ambroseno	Laura	Board of Directors
2	Arth	Alison	Board of Directors
3	Khan	Surina	Board of Directors
4	Cutts	Suzanne	Board of Directors
5	Patel	Seema	Board of Directors
6	Sanchez	Marty	Board of Directors
7	Truitt Sharafi	Katie	Board of Directors
8	Hower	Lindsay	Board of Directors
9	Lee	Daniel	Board of Directors
10	Lugo	Dilsa	Board of Directors
11	Massih	Amir	Board of Directors
12	Sivan	Jagadha	Board of Directors
13	Zandanel	Dara	Board of Directors
14	Zigas	Caleb	CEO
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9. AFFILIATES AND SUBCONTRACTORS

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BOS Clerk of the Board	



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Board of Supervisors	Members

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NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	415-701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Lawyers' Committee for Civil Rights of the SF Bay Area	TELEPHONE NUMBER 415-543-9444
STREET ADDRESS (including City, State and Zip Code) 131 Steuart Street, Suite 400, San Francisco, CA 94105	EMAIL admin@lccrsf.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 210768
DESCRIPTION OF AMOUNT OF CONTRACT \$100,000		
NATURE OF THE CONTRACT (Please describe) CDBG grant for legal services for entrepreneurs		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Lowe	David	Board of Directors
2	Bowen	Krystal	Board of Directors
3	Burris	John	Board of Directors
4	Cardoza	Raymond	Board of Directors
5	Finigan	Sara	Board of Directors
6	Guggenheim	Steve	Board of Directors
7	Kieve	Loren	Board of Directors
8	Kruze	Diana	Board of Directors
9	Marshall	Shauna	Board of Directors
10	Barnes	Suzette	Board of Directors
11	Sanger	Priya	Board of Directors
12	Singla	Rohit	Board of Directors
13	Sorensen	Jacob	Board of Directors
14	Sturdevant	James	Board of Directors
15	Thompson	Patrick	Board of Directors
16	Tillery	Khari	Board of Directors
17	Goldstein	Barry	Board of Directors
18	Koo	Alyssa	Board of Directors
19	Reagon	Bernida	Board of Directors

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
20	Varma	Monika	CEO
21	Shaw	Nancy	CFO
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9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



San Francisco Ethics Commission

25 Van Ness Avenue, Suite 220, San Francisco, CA 94102
 Phone: 415.252.3100 . Fax: 415.252.3112
ethics.commission@sfgov.org . www.sfethics.org

Received On:

210768

File #:

Bid/RFP #:

Notification of Contract Approval

SFEC Form 126(f)4

(S.F. Campaign and Governmental Conduct Code § 1.126(f)4)
 A Public Document

Each City elective officer who approves a contract that has a total anticipated or actual value of \$100,000 or more must file this form with the Ethics Commission within five business days of approval by: (a) the City elective officer, (b) any board on which the City elective officer serves, or (c) the board of any state agency on which an appointee of the City elective officer serves. For more information, see: <https://sfethics.org/compliance/city-officers/contract-approval-city-officers>

1. FILING INFORMATION

TYPE OF FILING	DATE OF ORIGINAL FILING <i>(for amendment only)</i>
Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	415-701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
Main Street Launch	510-763-4297	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
2101 Webster Street, Suite 1200, Oakland, CA 94612	jacob@mainstreetlaunch.org	

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		210768
DESCRIPTION OF AMOUNT OF CONTRACT		
\$105,000		
NATURE OF THE CONTRACT (Please describe)		
\$75,000 CDBG grant for revolving loan fund \$30,000 CDBG grant for technical assistance for African American business owners and microentrepreneurs		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Jones, II	Wendell	Board of Directors
2	Lindquist	Mark	Board of Directors
3	Green	Gladys	Board of Directors
4	Washington	Arthur	Board of Directors
5	Nelson	Eric	Board of Directors
6	Jones	Stephanie	Board of Directors
7	Hunt	LaSandra	Board of Directors
8	Ching	Matt	Board of Directors
9	Short	Tiffany	Board of Directors
10	Wong	Jim	Board of Directors
11	Singer	Jacob	CEO
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



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1. FILING INFORMATION

TYPE OF FILING	DATE OF ORIGINAL FILING <i>(for amendment only)</i>
Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Cavillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	415-701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
Mission Asset Fund	415-670-9103	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
3269 Mission Street, San Francisco, CA 94110	jose@missionassetfund.org	

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		210768
DESCRIPTION OF AMOUNT OF CONTRACT		
\$70,000		
NATURE OF THE CONTRACT (Please describe)		
CDBG grant for building credit and access to capital for microentrepreneurs		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Krimm	David	Board of Directors
2	Moreno	Haydee	Board of Directors
3	Santamaria	Manuel	Board of Directors
4	Soriano Versoza	Aquilina	Board of Directors
5	Angelmar	Cara	Board of Directors
6	Irons Seem	Elizabeth	Board of Directors
7	Leggett	Jessica	Board of Directors
8	Shah	Sagar	Board of Directors
9	Torres	Salvador	Board of Directors
10	Waldstrom	Stephan	Board of Directors
11	Sandoval	Gabriela	Board of Directors
12	Quinonez	Jose	CEO
13	Salas	Daniela	COO
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9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK BOS Clerk of the Board	DATE SIGNED
--	-------------



San Francisco Ethics Commission

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ethics.commission@sfgov.org . www.sfethics.org

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1. FILING INFORMATION

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Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	415-701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Mission Economic Development Agency	TELEPHONE NUMBER 415-282-3334
STREET ADDRESS (including City, State and Zip Code) 2301 Mission Street, San Francisco, CA 94110	EMAIL lgranados@medasf.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 210768
DESCRIPTION OF AMOUNT OF CONTRACT \$326,005		
NATURE OF THE CONTRACT (Please describe) \$114,005 CDBG for Homeownership education and counseling citywide \$52,000 CDBG for financial capability services, primarily for Latinx residents of the Mission \$75,000 CDBG for technical assistance in English and Spanish for microentrepreneurs \$50,000 CDBG for technical assistance for Latino and immigrant business owners and microentrepreneurs in the Bernal Heights, Mission-Bernal, and Mission Street (16th through 25th) commercial corridors \$35,000 CDBG for Mission Street/Outer Mission/Excelsior commercial corridor revitalization		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Terrazas	Dolores	Board of Directors
2	Garcia	Teresa M.	Board of Directors
3	Jones	Whitney	Board of Directors
4	Yaquian-Illescas	Rafael	Board of Directors
5	Cabrera	Ed	Board of Directors
6	Chavarín	Marco	Board of Directors
7	Duron	Ysabel	Board of Directors
8	Herbert	Jabari	Board of Directors
9	Stein	Kevin	Board of Directors
10	Granados	Luis	CEO
11	Chen-ok	Priscilla	CFO
12	Spindle	Jillian	COO
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9. AFFILIATES AND SUBCONTRACTORS

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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

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BOS Clerk of the Board	



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1. FILING INFORMATION

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Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	415-701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Mission Language and Vocational School	TELEPHONE NUMBER 415-622-5432 ext 2006
STREET ADDRESS (including City, State and Zip Code) 2929 19th Street, San Francisco, CA 94110	EMAIL vocschool@aol.com

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 210768
DESCRIPTION OF AMOUNT OF CONTRACT \$100,000		
NATURE OF THE CONTRACT (Please describe) CDBG grant for clinical health care training (Medical Assistant and Phlebotomy) to local residents		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
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9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Gallardo	Tracy	Board of Directors
2	Casco	Esther	Board of Directors
3	Menesini	Michael	Board of Directors
4	Sloan	Raymond	Board of Directors
5	Ruiz	Samuel	Board of Directors
6	Cisneros	Luz	Board of Directors
7	Hill	Menee	Board of Directors
8	Royal	Eva	Board of Directors
9	Alioto	Sebastian	CFO
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

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I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



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Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	415-701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
Mission Neighborhood Centers, Inc.	415-206-7752	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
362 Capp Street, San Francisco, CA 94110	richard.ybarra@mncsf.org	

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		210768
DESCRIPTION OF AMOUNT OF CONTRACT		
\$52,000		
NATURE OF THE CONTRACT (Please describe)		
CDBG grant for Academic skill building and GED preparation, primarily for Latinx residents citywide		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Hayon	Beverly	Board of Directors
2	Lei	Zonia	Board of Directors
3	Renderos	Maria	Board of Directors
4	Collins	Chris	Board of Directors
5	Rodriguez	Jose	Board of Directors
6	Carnero-Rossi	Liliana	Board of Directors
7	Sandlin	Gladys	Board of Directors
8	Lafauire	Dianne	Board of Directors
9	Ehrenfeld	Kelly	Board of Directors
10	Schulz	Erich	Board of Directors
11	Iranpour	Afsaneh	Board of Directors
12	Guillen	Maria	Board of Directors
13	Ybarra	Richard	CEO
14	Rodriguez	Jose	COO
15	Alioto	Sebastian	CFO
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9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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Incomplete - Pending Signature

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



San Francisco Ethics Commission

25 Van Ness Avenue, Suite 220, San Francisco, CA 94102
 Phone: 415.252.3100 . Fax: 415.252.3112
ethics.commission@sfgov.org . www.sfethics.org

Received On:

210768

File #:

Bid/RFP #:

Notification of Contract Approval

SFEC Form 126(f)4

(S.F. Campaign and Governmental Conduct Code § 1.126(f)4)
 A Public Document

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1. FILING INFORMATION

TYPE OF FILING	DATE OF ORIGINAL FILING <i>(for amendment only)</i>
Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	415-701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR North of Market/Tenderloin Community Benefit Corporation	TELEPHONE NUMBER 415-292-4812
STREET ADDRESS (including City, State and Zip Code) 512 Ellis Street San Francisco CA 94109	EMAIL simon@tlcbd.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 210768
DESCRIPTION OF AMOUNT OF CONTRACT \$100,000		
NATURE OF THE CONTRACT (Please describe) \$80,000 CDBG grant for Tenderloin commercial corridor revitalization \$20,000 CDBG grant for Tenderloin commercial corridor technical assistance		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Caulder	Lowell	Board of Directors
2	Bailard	Rhiannon	Board of Directors
3	Young	Mike	Board of Directors
4	Karkhanis	Aashish	Board of Directors
5	McKinnon	Susie	Board of Directors
6	Borgna	Beth	Board of Directors
7	Guggenheim	Regina	Board of Directors
8	Colorado Jr.	Rene	Board of Directors
9	Adbou	Soha	Board of Directors
10	Bradford	Curtis	Board of Directors
11	Kiss	Jennifer	Board of Directors
12	Ramish	Cindy	Board of Directors
13	Shirilla	Christie	Board of Directors
14	Villalobos	Kristen	Board of Directors
15	Bertrang	Simon	CEO
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9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



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1. FILING INFORMATION	
TYPE OF FILING	DATE OF ORIGINAL FILING <i>(for amendment only)</i>
Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD	
OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT	
NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT	
NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	415-701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
Ocean Avenue Association	415-404-1296	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
1728 Ocean Avenue - PMB 154, San Francisco, CA 94112	info.oacbd@gmail.com	

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		210768
DESCRIPTION OF AMOUNT OF CONTRACT		
\$40,000		
NATURE OF THE CONTRACT (Please describe)		
CDBG grant for Ocean Avenue commercial corridor revitalization and technical assistance		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Chung	Howard	Board of Directors
2	Kevane	Henry	Board of Directors
3	Lima	Shirley	Board of Directors
4	Gon	Walee	Board of Directors
5	Zarate	Lucia Fuentes	Board of Directors
6	Hamilton	Jeff	Board of Directors
7	Godinez	Christine	Board of Directors
8	Summerland	Janene	Board of Directors
9	Weaver	Daniel	CEO
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9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

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Incomplete - Pending Signature

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



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Received On:

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File #:

Bid/RFP #:

Notification of Contract Approval

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1. FILING INFORMATION

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Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	415-701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
PRC	415-972-0806	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
170 9th Street, San Francisco, CA 94103	brett.andrews@prcsf.org	

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		210768
DESCRIPTION OF AMOUNT OF CONTRACT		
\$100,000		
NATURE OF THE CONTRACT (Please describe)		
CDBG Grant for individualized culturally competent employment services to individuals with HIV/AIDS or mental health disabilities.		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Browning	Doug	Board of Directors
2	Matheson	Bill	Board of Directors
3	Justus	Scott	Board of Directors
4	Roger	Kent	Board of Directors
5	Treaster	Merridith	Board of Directors
6	McKeel	Ryan	Board of Directors
7	Schroeder	Tim	Board of Directors
8	Schroeder	Brian	Board of Directors
9	Luna	Anne	Board of Directors
10	Ishida	Ryo	Board of Directors
11	Andrews	Brett	CEO
12	Tuohy	Joe	COO
13	Pascual	Roberty	CFO
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9. AFFILIATES AND SUBCONTRACTORS

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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

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I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



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1. FILING INFORMATION

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AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	415-701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR Renaissance Entrepreneurship Center	TELEPHONE NUMBER 415-541-8580	
STREET ADDRESS (including City, State and Zip Code) 275 5th Street, San Francisco, CA 94103	EMAIL sharon@rencenter.org	

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 210768
DESCRIPTION OF AMOUNT OF CONTRACT \$195,000		
NATURE OF THE CONTRACT (Please describe) \$40,000 CDBG for technical assistance for Bayview small businesses \$75,000 CDBG for technical assistance for microentrepreneurs \$40,000 CDBG for technical assistance in English and Spanish to women entrepreneurs \$40,000 CDBG for technical assistance for Third Street and Lower Fillmore commercial corridor small businesses		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Jacoby	Craig	Board of Directors
2	Baranano	Gerry	Board of Directors
3	Bamba Chennault	Marivic	Board of Directors
4	Davis	Alison	Board of Directors
5	Eichmann Datta	Yasmin	Board of Directors
6	Frederiksen	Emily Rose	Board of Directors
7	Gottlieb	Neal	Board of Directors
8	Pan	Roland	Board of Directors
9	Zavala	Feliciano	Board of Directors
10	Gandhi	Munish	Board of Directors
11	Gibson	Heidi	Board of Directors
12	Karir	Vishal	Board of Directors
13	Koblis	Philip	Board of Directors
14	Wang	Karly	Board of Directors
15	Butler	Meghan	Board of Directors
16	Straus	Sandor	Board of Directors
17	Miller	Sharon	CEO
18	Kirvin	Lisa	COO
19			

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

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SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



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1. FILING INFORMATION

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Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	415-701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR		TELEPHONE NUMBER
San Francisco Housing Development Corporation		415-822-1022
STREET ADDRESS (including City, State and Zip Code)		EMAIL
4439 3rd Street, San Francisco, CA 94124		David@sfhdc.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		210768
DESCRIPTION OF AMOUNT OF CONTRACT		
\$157,895		
NATURE OF THE CONTRACT (Please describe)		
CDBG grant for homeownership education and counseling citywide		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Kaslofsky	Thor	Board of Directors
2	Golvin	Ben	Board of Directors
3	Turner	Charles	Board of Directors
4	Vincent	Dorris	Board of Directors
5	Walker	Eddie	Board of Directors
6	Beiro	Noreen	Board of Directors
7	Wong	Daniel	Board of Directors
8	Eskilden	Jennifer	Board of Directors
9	Robinson	Lena	Board of Directors
10	Sobel	David	CEO
11	Kodzis	Peter	CFO
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9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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Incomplete - Pending Signature

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



San Francisco Ethics Commission

25 Van Ness Avenue, Suite 220, San Francisco, CA 94102
 Phone: 415.252.3100 . Fax: 415.252.3112
ethics.commission@sfgov.org . www.sfethics.org

Received On:

210768

File #:

Bid/RFP #:

Notification of Contract Approval

SFEC Form 126(f)4

(S.F. Campaign and Governmental Conduct Code § 1.126(f)4)
 A Public Document

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1. FILING INFORMATION

TYPE OF FILING	DATE OF ORIGINAL FILING <i>(for amendment only)</i>
Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	415-701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR SF Lesbian Gay Bisexual Transgender Community Center	TELEPHONE NUMBER 415-865-5521
STREET ADDRESS (including City, State and Zip Code) 1800 Market Street, San Francisco CA 94102	EMAIL Rebeccar@sfcenter.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 210768
DESCRIPTION OF AMOUNT OF CONTRACT \$70,000		
NATURE OF THE CONTRACT (Please describe) CDBG grant for technical assistance, credit building microloans, workshops and mentorship		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Jesmonth	Sally	Board of Directors
2	Albright	Mika	Board of Directors
3	Brown	Jim	Board of Directors
4	Millard	Jonathan	Board of Directors
5	Paul	Chris	Board of Directors
6	Sun	Jeff	Board of Directors
7	King	Michelle	Board of Directors
8	De La O	Robert	Board of Directors
9	Natoli	Jane	Board of Directors
10	Rice	Pamela	Board of Directors
11	Gutierrez	Carlos	Board of Directors
12	Hernandez	Genesis	Board of Directors
13	Kulkarni	Hrishi	Board of Directors
14	Perrson	Maceo	Board of Directors
15	Rolfe	Rebecca	CEO
16	Grant	Jennifer	CFO
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9. AFFILIATES AND SUBCONTRACTORS

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9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



San Francisco Ethics Commission

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ethics.commission@sfgov.org . www.sfethics.org

Received On:

210768

File #:

Bid/RFP #:

Notification of Contract Approval

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1. FILING INFORMATION

TYPE OF FILING	DATE OF ORIGINAL FILING <i>(for amendment only)</i>
Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	415-701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR		TELEPHONE NUMBER
San Francisco Study Center, Incorporated		415-626-1650
STREET ADDRESS (including City, State and Zip Code)		EMAIL
1663 Mission Street, #310, San Francisco, CA 94103		geoff@studycenter.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		210768
DESCRIPTION OF AMOUNT OF CONTRACT		
\$564,034		
NATURE OF THE CONTRACT (Please describe)		
CDBG grant for tenant counseling and education citywide		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Burks	John	Board of Directors
2	Livingston	Richard	Board of Directors
3	Yee	Tina	Board of Directors
4	True	Reiko	Board of Directors
5	Margaronis	Stas	Board of Directors
6	Mcwilliams	Jim	Board of Directors
7	Fong-Torres	Ben	Board of Directors
8	Kutnick	Ben	Board of Directors
9	Elbgal	Hazim	Board of Directors
10	Link	Geoffrey	CEO
11	Chen	Jaden	CFO
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9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

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List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



San Francisco Ethics Commission

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ethics.commission@sfgov.org . www.sfethics.org

Received On:

210768

File #:

Bid/RFP #:

Notification of Contract Approval

SFEC Form 126(f)4

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 A Public Document

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1. FILING INFORMATION

TYPE OF FILING	DATE OF ORIGINAL FILING <i>(for amendment only)</i>
Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	415-701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
Self-Help for the Elderly	415-677-7600	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
731 Sansome Street, Suite 100, San Francisco, CA 94111	annic@selfhelpelderly.org	

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		210768
DESCRIPTION OF AMOUNT OF CONTRACT		
\$15,000		
NATURE OF THE CONTRACT (Please describe)		
CDBG grant for Small business revitalization		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Wang	Linda	Board of Directors
2	Kaung	Janie	Board of Directors
3	Jay	Nicholas	Board of Directors
4	Wong	May	Board of Directors
5	Cheng	Angel	Board of Directors
6	Koo	Rosalyn	Board of Directors
7	Schulte	Bill	Board of Directors
8	Chang	Mary	Board of Directors
9	Chang	Mary	Board of Directors
10	Au	Yat Pang	Board of Directors
11	Li	Dominic	Board of Directors
12	Lee	Jerry	Board of Directors
13	Chung	Anni	CEO
14	Nair	Leny	CFO
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9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

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I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



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1. FILING INFORMATION

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Original	
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2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	415-701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
SFMade, Inc.	415-408-5605	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
150 Hooper Street, Unit 200, San Francisco, CA 94107	janet@sfmade.org	

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		210768
DESCRIPTION OF AMOUNT OF CONTRACT		
\$65,000		
NATURE OF THE CONTRACT (Please describe)		
CDBG grant for technical assistance for local manufacturers		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Bacca	Hillary	Board of Directors
2	Bell	Veronica	Board of Directors
3	Burton	Tracy	Board of Directors
4	Allbin	Alicia Esterkamp	Board of Directors
5	Knorpp	Jonathan	Board of Directors
6	Ovian	Rosemarie	Board of Directors
7	Rhett	Byron	Board of Directors
8	Wang	Wenli	Board of Directors
9	Dwight	Mark	Board of Directors
10	Lees	Janet	CEO
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9. AFFILIATES AND SUBCONTRACTORS

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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK BOS Clerk of the Board	DATE SIGNED
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2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	415-701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
Southeast Asian Community Center	415-885-2743	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
875 O'Farrell Street, San Francisco, CA 94109	dv94606@yahoo.com	

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		210768
DESCRIPTION OF AMOUNT OF CONTRACT		
\$130,000		
NATURE OF THE CONTRACT (Please describe)		
<p>\$55,000 CDBG grant for technical assistance for small businesses in Visitacion Valley, Sunset, and Larkin Street/Little Saigon commercial corridors</p> <p>\$75,000 CDBG grant for technical assistance in English and Chinese for small businesses citywide</p>		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Nguyen-Smith	Thuy	Board of Directors
2	Aghamane	Salma	Board of Directors
3	Fong	Lan	Board of Directors
4	Lee	Cindy	Board of Directors
5	Su	Christine	Board of Directors
6	Lee	Gary	Board of Directors
7	Nguyen	Philip	Board of Directors
8	Vuong	Diana	CEO
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9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



San Francisco Ethics Commission

25 Van Ness Avenue, Suite 220, San Francisco, CA 94102
 Phone: 415.252.3100 . Fax: 415.252.3112
ethics.commission@sfgov.org . www.sfethics.org

Received On:

210768

File #:

Bid/RFP #:

Notification of Contract Approval

SFEC Form 126(f)4

(S.F. Campaign and Governmental Conduct Code § 1.126(f)4)
 A Public Document

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1. FILING INFORMATION

TYPE OF FILING	DATE OF ORIGINAL FILING <i>(for amendment only)</i>
Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	415-701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Swords to Plowshares: Veterans Rights Organization	TELEPHONE NUMBER 415-252-4788
STREET ADDRESS (including City, State and Zip Code) 1060 Howard Street, San Francisco, CA 94103	EMAIL michael.blecker@stp-sf.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 210768
DESCRIPTION OF AMOUNT OF CONTRACT \$65,811		
NATURE OF THE CONTRACT (Please describe) CDBG grant for legal representation and advocacy for VA benefits, primarily for homeless and low-income veterans		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Seymour	De ^l	Board of Directors
2	Fassler	Michael	Board of Directors
3	Plath	Stephen	Board of Directors
4	Houlberg	Rick	Board of Directors
5	Dekshenieks	Michael	Board of Directors
6	Trevorrow	Robert	Board of Directors
7	Thiel	Michael	Board of Directors
8	Marquez	John	Board of Directors
9	Edwards	Erik	Board of Directors
10	Cane	Julie	Board of Directors
11	Kennedy	Ronan	Board of Directors
12	Buzaid	Felipe	Board of Directors
13	Richardson	Kate	Board of Directors
14	Blecker	Michael	CEO
15	Winston	Leon	COO
16	Frost	Karen	CFO
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9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



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1. FILING INFORMATION

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Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	415-701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Tenderloin Housing Clinic	TELEPHONE NUMBER 415-885-3286
STREET ADDRESS (including City, State and Zip Code) 126 Hyde Street, San Francisco, CA 94102	EMAIL randy@thclinic.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 210768
DESCRIPTION OF AMOUNT OF CONTRACT \$992,720		
NATURE OF THE CONTRACT (Please describe) CDBG grant for Tenant Right to Counsel partner providing full-scope legal representation for residents facing eviction		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Tiedemann	Chris	Board of Directors
2	Dufty	Otto	Board of Directors
3	Brophy	Ken	Board of Directors
4	Wilson	Randy	Board of Directors
5	Medeiros	Jodie	Board of Directors
6	Seagraves	Gail	Board of Directors
7	Pujals	Fernando	Board of Directors
8	Shaw	Randy	CEO
9	Allen	Tabitha	COO
10	Tang	Wynne	CFO
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9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

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Incomplete - Pending Signature

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



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Received On:

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Notification of Contract Approval

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1. FILING INFORMATION

TYPE OF FILING	DATE OF ORIGINAL FILING <i>(for amendment only)</i>
Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	415-701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR		TELEPHONE NUMBER
YMCA of San Francisco (Urban Service Branch)		415-561-0631
STREET ADDRESS (including City, State and Zip Code)		EMAIL
50 California Street, Suite 650, San Francisco, CA 941		edaskalakis@ymcasf.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		210768
DESCRIPTION OF AMOUNT OF CONTRACT		
\$240,000		
NATURE OF THE CONTRACT (Please describe)		
CDBG grant for Service connection, primarily for API residents citywide and in District 11		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Chidi	Basil	Board of Directors
2	Chuch	Lisa	Board of Directors
3	Galou-Lameyer	Maria	Board of Directors
4	Gupta	Vivek	Board of Directors
5	Hunt	Greg	Board of Directors
6	Juan	Lissa	Board of Directors
7	Karam	Michel	Board of Directors
8	Lynch	Rob	Board of Directors
9	Pascucci	Mike	Board of Directors
10	Pleschner	Eric	Board of Directors
11	Raina	Savita	Board of Directors
12	Schlacter	Jessica	Board of Directors
13	Sikora	Luke	Board of Directors
14	Turlington	Melanie	Board of Directors
15	Uken	Jeff	Board of Directors
16	Yang	Happy	Board of Directors
17	Zanella	Stefano	Board of Directors
18	Daskalakis	Evelyn	CEO
19	Buring-Miles	Jamie	COO

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
20	Cheng	Kathy	CFO
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

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SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



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1. FILING INFORMATION

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Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	415-701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
Wu Yee Children's Services	415-677-0100	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
827 Broadway Street, San Francisco, CA 94133	monica.walters@wuyee.org	

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		210768
DESCRIPTION OF AMOUNT OF CONTRACT		
\$196,000		
NATURE OF THE CONTRACT (Please describe)		
\$96,000 CDBG grant for service connection, primarily for API residents citywide \$100,000 CDBG grant for technical assistance for child care businesses		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
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9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Ngo	Catherine	Board of Directors
2	Wong	Irene	Board of Directors
3	Wu	Raymond	Board of Directors
4	Thomas	Sonya	Board of Directors
5	Donovan	Sharon	Board of Directors
6	Weng	Sandra	Board of Directors
7	Lee	Albert	Board of Directors
8	Ho	Carmen	Board of Directors
9	Yang	Cindy	Board of Directors
10	Delacruz	Raymond	Board of Directors
11	Kuo	Christopher	Board of Directors
12	Marotta	Dean	Board of Directors
13	Ziegler	David	Board of Directors
14	Walters	Monica	CEO
15	Neumann	Mike	COO
16	Tao	Mark	CFO
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9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

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Original	
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2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat	415-701-5565
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR	dolly.sithounnolat@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR Young Community Developers, Inc.		TELEPHONE NUMBER 415-822-3491
STREET ADDRESS (including City, State and Zip Code) 1715 Yosemite Avenue, San Francisco, CA 94124		EMAIL dbrookter@ycdjobs.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 210768
DESCRIPTION OF AMOUNT OF CONTRACT \$480,029		
NATURE OF THE CONTRACT (Please describe) \$50,000 CDBG grant for academic skill building and short-term case management, primarily for Alice Griffith youth \$430,029 CDBG grant for individualized employment services to Tenderloin residents.		

7. COMMENTS	

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Spencer	Sedrick	Board of Directors
2	Parikh	Mitesh	Board of Directors
3	Smith	Cheryl	Board of Directors
4	Andrew	Rhonda	Board of Directors
5	Potashner	Eric	Board of Directors
6	Moses	Toye	Board of Directors
7	Everhart	Claude	Board of Directors
8	Tatum	Carol	Board of Directors
9	Anderson	Nadia	Board of Directors
10	Jones	Shirley	Board of Directors
11	Turner	Charles	Board of Directors
12	Shah	Kinjal	Board of Directors
13	Brookter	Dion-Jay	CEO
14	Waters	Timothy	COO
15	Yoo	Jenny	CFO
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9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	