

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: 12-15-2023 | 16:12:00 PST

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File #: 231149

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 (for amendment only)			
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
Reanna Albert		628-271-6178
FULL DEPARTMENT NAME		DEPARTMENT CONTACT EMAIL
DPH	Department of Public Health	reanna.albert@sfdph.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
The Regents of the University of California	415-350-5408	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
3333 California Street, San Francisco, CA 94143	cgccsfteam@ucsf.edu	

6 00	ONTRACT		
	E CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
DAIL	CONTRACT WAS AFFROVED BY THE CITY ELECTIVE OFFICER(S)	ONIGINAL BID/NIF NOWIDEN	231149
12	/12/2023		
DECC	PRIDTION OF ANAQUAIT OF CONTRACT		
DESC	RIPTION OF AMOUNT OF CONTRACT		
No	t to exceed \$26,481,255		
NAT	JRE OF THE CONTRACT (Please describe)		
Pr	ovide outpatient/ambulatory HIV health servi	ces - Centers of Exce	llence Programs.
			-
7. CC	DMMENTS		
	ONTRACT APPROVAL		
This	contract was approved by:		
	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM		
Ш			
	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES		
	Board of Supervisors		
	Board of Supervisors		
	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF	THE CITY ELECTIVE OFFICER(S) I	DENTIFIED 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	ТҮРЕ
1	Anguiano	Maria	Other Principal Officer
2	Batchlor	Elaine	Other Principal Officer
3	Chu	Carmen	Other Principal Officer
4	Cohen	Michael	Other Principal Officer
5	Elliott	Gareth	Other Principal Officer
6	Guber	Howard	Other Principal Officer
7	Hernandez	Jose	Other Principal Officer
8	Lee	Nancy	Other Principal Officer
9	Leib	Richard	Other Principal Officer
10	Makarechian	Hadi	Other Principal Officer
11	Matosantos	Ana	Other Principal Officer
12	Perez	John	Other Principal Officer
13	Park	Lark	Other Principal Officer
14	Reilly	Janet	Other Principal Officer
15	Robinson	Mark	Other Principal Officer
16	Sarris	Gregory	Other Principal Officer
17	Sherman	Richard	Other Principal Officer
18	Sures	Jonathan	Other Principal Officer
19	Tesfai	Merhawi	CEO

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.

contract.			
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
20	Hawgood	Sam	CEO
21	Clune	Michael	CF0
22	Collard	Harold	Other Principal Officer
23	Lucey	Catherine	Other Principal Officer
24	Smith	Brian	Other Principal Officer
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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 39 40 41 42 43 44 45 46 47 48 49 50 Check this box if you need to include additional names. Please submit a separate form with complete information.

Select "Supplemental" for filling 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	DATE SIGNED		
CLERKDocuSigned by:			
A CACICAGO	12-15-2023 16:12:00 PST		
000001400000405			
Angela Calvillo			