

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

City Elective Officer Information <i>(Please print clearly.)</i>	
Name of City elective officer(s): Members, Board of Supervisors	City elective office(s) held: Members, Board of Supervisors
Contractor Information <i>(Please print clearly.)</i>	
Name of contractor: Lower Polk Community Benefit District	
<p><i>Please list the names of (1) members of the contractor's board of directors; (2) the contractor's chief executive officer, chief financial officer and chief operating officer; (3) any person who has an ownership of 20 percent or more in the contractor; (4) any subcontractor listed in the bid or contract; and (5) any political committee sponsored or controlled by the contractor. Use additional pages as necessary.</i></p> <p>1) Chris Schulman Raul Avila Jamie Fountain Kenny Meade Lori Martens Vahram Massenhian Bhavana Manchanda Lindsey Fisher Al Casciato</p> <p>2) Chris Schulman - President Jamie Fountain - CFO & Secretary</p> <p>3) N/A</p> <p>4) N/A</p> <p>5) N/A</p>	
Contractor address: P.O Box: 640651, San Francisco, CA 94164	
Date that contract was approved: <i>(By the SF Board of Supervisors) 7/28/2015</i>	Amount of contracts: \$ 14,862,271.83 (note: this amount represents an estimate of total distributions from the City to the District throughout the entirety of the District's duration. The District is currently slated to sunset in 2029.)
Describe the nature of the contract that was approved: The Board of Supervisors approved a Resolution (File No. 140820) authorizing the City and County of San Francisco to enter into an agreement with the Lower Polk Community Benefit District to disburse District assessment funds collected by the City to the District in order for the District to begin providing services as specified in the Lower Polk Community Benefit District Management Plan.	
Comments: This is a standard contract which the City enters into with a Community Benefit District/Business Improvement District in order to allocate funds for services to be performed by the entity within their designated operating area.	

This contract was approved by (check applicable):

the City elective officer(s) identified on this form

a board on which the City elective officer(s) serves: San Francisco Board of Supervisors

Print Name of Board

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

Print Name of Board

Filer Information *(Please print clearly.)*

Name of filer:

Angela Calvillo, Clerk of the Board

Contact telephone number:

(415) 554-5184

Address:

City Hall, Room 244, 1 Dr. Carlton B. Goodlett Pl., San Francisco, CA 94102

E-mail:

Board.of.Supervisors@sfgov.org

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

Date Signed

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

Date Signed