



## San Francisco Ethics Commission

25 Van Ness Avenue, Suite 220, San Francisco, CA 94102

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[ethics.commission@sfgov.org](mailto:ethics.commission@sfgov.org) . [www.sfethics.org](http://www.sfethics.org)

Received On: 12-15-2025 | 16:59:13 PST

File #: 251108

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

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

#### 2. CITY ELECTIVE OFFICE OR BOARD

<b>OFFICE OR BOARD</b>	<b>NAME OF CITY ELECTIVE OFFICER</b>
Board of Supervisors	Members

#### 3. FILER'S CONTACT

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

#### 4. CONTRACTING DEPARTMENT CONTACT

<b>NAME OF DEPARTMENTAL CONTACT</b>	<b>DEPARTMENT CONTACT TELEPHONE NUMBER</b>
Omar Masry	6286525839
<b>FULL DEPARTMENT NAME</b>	<b>DEPARTMENT CONTACT EMAIL</b>
MYR Mayor's Office of Comm. Dev.	omar.masry@sfgov.org

5. CONTRACTOR	
<b>NAME OF CONTRACTOR</b>  1035Vets LLC	<b>TELEPHONE NUMBER</b>  4152524788
<b>STREET ADDRESS (including City, State and Zip Code)</b>  1060 Howard Street, San Francisco, CA 94103	<b>EMAIL</b>  steven.culbertson@stp-sf.org

6. CONTRACT		
<b>DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)</b>  12/9/2025	<b>ORIGINAL BID/RFP NUMBER</b>	<b>FILE NUMBER (If applicable)</b> 251108
<b>DESCRIPTION OF AMOUNT OF CONTRACT</b>  NTE \$39,044,030		
<b>NATURE OF THE CONTRACT (Please describe)</b>  <p>Accept and Expend of Homekey+ Award from the State of California Department of Housing and Community Development (HCD) for an amount not to exceed \$39,044,030 including up to \$36,044,030 disbursed by HCD as a grant to 1035Vets LLC for acquisition of real property located at 1035 Van Ness for permanent supportive housing for veterans (the "Property") and support of operating costs, and up to \$3,000,000 disbursed by HCD as a grant to the City for rehabilitation of the Property; 2) retroactively accept and expend anticipated revenue from the City's portion of Homekey+ grant funds in an amount up to \$3,000,000 for the rehabilitation of the Property; 3) approving and authorizing the City to commit up to \$8,000,000 in required matching funds for rehabilitation of the Property and a minimum of 5 years of operating subsidy</p>		

7. COMMENTS
Swords to Plowshares Veterans Rights Organization (Swords), as sole member and manager of 1035Vets LLC

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

**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	Garner/Swords	Tramecia	CEO
2	Kim/Swords	Elena	COO
3	Chen/Swords	Stephen	CFO
4	Corliss Murakami/Swords	Colleen	Other Principal Officer
5	Thiel/Swords	Michael	Board of Directors
6	Cane/Swords	Julie	Board of Directors
7	Saavedra/Swords	Barbara	Board of Directors
8	Adame/Swords	Chris	Board of Directors
9	Cox/Swords	Paul	Board of Directors
10	Dekshenieks/Swords	Michael	Board of Directors
11	Edwards/Swords	Erik	Board of Directors
12	Fassler/Swords	Michael	Board of Directors
13	Guy/Swords	Dottie	Board of Directors
14	McQuaid/Swords	John	Board of Directors
15	Ordonia/Swords	Placido "Joe"	Board of Directors
16	Richardson/Swords	Kate	Board of Directors
17	Seymour/Swords	Deleano "Del"	Board of Directors
18	Steward/Swords	Seth	Board of Directors
19	Solit/Swords	Micah	Board of Directors

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
20	Williamson/Swords	Diane	Board of Directors
21	Yeates-Rowe/Swords	Maile	Board of Directors
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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☐ 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**

Signed by:  
  
 988C8F42C3084B5...  
 Angela Calvillo

**DATE SIGNED**

12-15-2025 | 16:59:13 PST