



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: 12-17-2024 | 09:58:11 PST

File #: 241130

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
Matthew Ahn	6286523063
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DEC Department of Early Childhood	MAhn@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Low Income Investment Fund	TELEPHONE NUMBER 415-276-2900
STREET ADDRESS (including City, State and Zip Code) 49 Stevenson St., Suite 300 San Francisco, CA 94105	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S) 12/10/2024	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 241130
DESCRIPTION OF AMOUNT OF CONTRACT NTE \$67,715,789		
NATURE OF THE CONTRACT (Please describe) To administer the San Francisco child care facilities grant fund 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	Nissenbaum	Daniel	CEO
2	Nelligan	Kimberly	Other Principal Officer
3	Mahendru	Panagiota	CFO
4	Ocanas	Reymundo	Board of Directors
5	Sager	Jessica	Board of Directors
6	Bruemmer	Russell	Board of Directors
7	Fitzgerald	Eileen	Board of Directors
8	Anadu	Margaret	Board of Directors
9	Black	Tawanna	Board of Directors
10	Fleming	David	Board of Directors
11	Gladney	Calvin	Board of Directors
12	Kelly	William	Board of Directors
13	Lee	Gloria	Board of Directors
14	Naughton	Carol	Board of Directors
15	Nelson	Dionne	Board of Directors
16	Poethig	Erika	Board of Directors
17	Quiroz	Yohana	Board of Directors
18	Solomon	Michael	Board of Directors
19			

9. AFFILIATES AND SUBCONTRACTORS

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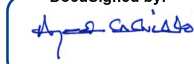
☐ Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.

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

DocuSigned by:

 988C8F42C3084B5
 Angela Calvillo

DATE SIGNED

12-17-2024 | 09:58:11 PST