



San Francisco Ethics Commission

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Received On: 02-09-2021 | 19:31:50 PST

File #: 201423

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
Claudine del Rosario	415-613-4854
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office Housing & Comm. Dev.	claudine.delrosario@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR UCSF HEARTS Program	TELEPHONE NUMBER 415-206-3278
STREET ADDRESS (including City, State and Zip Code) 1111 Franklin Street, 12th floor, Oakland, CA 94607	EMAIL joyce.dorado@ucsf.edu

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S) 02/02/2021	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 201423
DESCRIPTION OF AMOUNT OF CONTRACT \$78,000		
NATURE OF THE CONTRACT (Please describe) Trauma-informed Systems training and clinical support for staff, faculty, students and families at Bessie Carmichael School A		

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	Anguiano	Maria	Board of Directors
2	Blum	Richard	Board of Directors
3	Butler	Laphonza	Board of Directors
4	Cohen	Michael	Board of Directors
5	Elliot	Gareth	Board of Directors
6	Estolano	Cecilia	Board of Directors
7	Guber	Harold "Peter"	Board of Directors
8	Kieffer	George	Board of Directors
9	Lansing	Sherry	Board of Directors
10	Lieb	Richard	Board of Directors
11	Makarechian	Hadi	Board of Directors
12	Muwwaakkil	Jamaal	Board of Directors
13	Oakley	Eloy Ortiz	Board of Directors
14	Park	Lark	Board of Directors
15	Perez	John A.	Board of Directors
16	Reilly	Janet	Board of Directors
17	Sherman	Richard	Board of Directors
18	Sures	Jonathan "Jay"	Board of Directors
19	Zettel	Charlene	Board of Directors

9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
20	To1ou-Shams	Marina	Other Principal officer
21	Dorado	Joyce	Other Principal officer
22			
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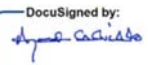
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.

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	DATE SIGNED
DocuSigned by:  988C8F42C308485 Angela Calvillo	02-09-2021 19:31:50 PST