

## 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: 09-12-2025 | 16:20:25 PDT

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File #: 250751

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/cityofficers/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				
Project Open Hand		415-447-2326			
STREET ADDRESS (including City, State and Zip Code)		EMAIL			
730 Polk Street, San Francisco, CA 94109					
6. CONTRACT					
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (If applicable)		
09/09/2025			250751		
DESCRIPTION OF AMOUNT OF CONTRACT					
NTE \$20,528,272					
NATURE OF THE CONTRACT (Please describe)					
Provide HIV/AIDS Food and Nutrition Services.					
7. COMMENTS					
7. COMMILICITY					
8. CONTRACT APPROVAL					
This contract was approved by:					
THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM					
A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES					
Board of Supervisors					
THE ROADD OF A STATE ACENCY ON WHICH AN ADDOINTER OF	THE CITY EI ECTIV	(E UEEICED(C) II	DENTIFIED ON THIS CODES SITS		
THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF	THE CITT ELECTIV	L OFFICER(3) II	PERMITTED OIN THIS FORIN SITS		
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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	ТҮРЕ
1	Henry	Mike	Board of Directors
2	Maring, M.D.	Preston	Board of Directors
3	Chang	Andrew	Board of Directors
4	Chandra	Vishwa	Board of Directors
5	Chang	Theresa	Board of Directors
6	Long	Richard	Board of Directors
7	Holt	Susanna	Board of Directors
8	Wei	Jason	Board of Directors
9	Alley	Drew	Board of Directors
10	Horton	Claire	Board of Directors
11	Dillon	Mike	Board of Directors
12	Hepfer	Paul	Other Principal Officer
13	Dong	Herbert	Other Principal Officer
14	Jackson	Katherine	Other Principal Officer
15	Okulolo	Onome	Other Principal Officer
16	Ayala	Ana	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	ТҮРЕ
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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				
exec	cutive officer, chief financial officer, chief	operating officer, o	r other persons with s	similar titles; (C) any individual or entity	
cont	has an ownership interest of 10 percent aract.	or more in the cont	ractor; and (D) any su	bcontractor listed in the bid of	
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME		ТҮРЕ	
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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	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:  DATE SIGNED					

09-12-2025 | 16:20:25 PDT

lngla (alvillo 988C8F42C3984B5 Angela Calvillo