

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: Armstrong Place Associates, L.P., a California limited partnership	
<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>Armstrong Place Associates is a California limited partnership and does not have a board of directors or officers. Its managing GP, Site K, Inc. has the following directors and officers.</p> <p>Directors: Cynthia Parker D. Valentine Kimberly McKay Rebecca Hlebasko Susan Johnson</p> <p>Officers: President: Cynthia Parker CFO: D Valentine VP/Secretary: Susan Johnson VP: Kimberly McKay VP: Rebecca Hlebasko</p>	
Contractor address: Armstrong Place Associates, L.P., 600 California Street, Suite 900, San Francisco, CA 94108	
Date that contract was approved:	Amount of contract: \$4,237,156
Describe the nature of the contract that was approved: Local Operating Subsidy Program (LOSP) Grant Agreement for 15.2 years in a total amount of up to \$4,237,156 to subsidize the cost of operations of 23 units for homeless seniors at the 116-unit affordable housing development.	
Comments:	

This contract was approved by (check applicable):

- the City elective officer(s) identified on this form (Mayor Edwin M. Lee)
- 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