

File No. 220688

Committee Item No. 4

Board Item No. _____

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Budget and Appropriations Committee Date June 16, 2022

Board of Supervisors Meeting Date _____

Cmte Board

- Motion
- Resolution
- Ordinance
- Legislative Digest
- Budget and Legislative Analyst Report
- Youth Commission Report
- Introduction Form
- Department/Agency Cover Letter and/or Report
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- Grant Information Form
- Grant Budget
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- Form 126 – Ethics Commission
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OTHER (Use back side if additional space is needed)

- Attachment A – State Recurring Grants – FY2022-2023
- Recurring Grants Subcontractors FY21-22
- List of Subcontractors for Forms 126
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Completed by: Brent Jalipa Date June 10, 2022

Completed by: Brent Jalipa Date _____

1 [Accept and Expend Grants - Recurring State Grant Funds - Department of Public Health -
2 FY2022-2023]

3 **Resolution authorizing the acceptance and expenditure of State grant funds by the San**
4 **Francisco Department of Public Health for Fiscal Year (FY) 2022-2023.**

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6 WHEREAS, The San Francisco Administrative Code requires City Departments to
7 obtain Board of Supervisor’s approval in order to accept or expend any grant funds (Section
8 10.170 et seq.); and

9 WHEREAS, The Board of Supervisors provided in Section 11.1 of the administrative
10 provisions of the Fiscal Year (FY)2022-2023 Annual Appropriation Ordinance that approval of
11 recurring grant funds contained in departmental budget submissions and approved in the
12 FY2022-2023 budget are deemed to meet the requirements of the San Francisco
13 Administrative Code regarding grant approvals; and

14 WHEREAS, The agencies of the State of California that provide grant funds to
15 Department of Public Health (DPH) require documentation of the Board’s approval of their
16 specific grant funds (State Administrative Manual, Section 1208.2 (a)); and

17 WHEREAS, The City’s budget for FY2022-2023 does not list each State grant but
18 contains two aggregate items; one indicating all Federal, and one all State grant funds; and

19 WHEREAS, Department of Public Health has prepared a document entitled “Recurring
20 FY2022-2023 State Grants, Attachment A” that lists the estimated amount of each recurring
21 grant provided by the State of California for FY2022-2023, the State agency that provides the
22 grant, and the indirect costs of each grant, which is on file with Clerk of the Board of
23 Supervisors in File No. 220688; and

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1 WHEREAS, As a result of periodic redistribution of appropriations within the State
2 budget, Department of Public Health may, in fact, receive more money or less money from
3 some of the various grants itemized in the attached document that Department of Public
4 Health estimates at this time; and

5 WHEREAS, This Resolution requires expedited review by the Board of Supervisors to
6 ensure that documentation of specific grant funds can be provided to the State as early as
7 possible in the funding year; and

8 WHEREAS, Resolutions authorizing the acceptance and expenditure of grant funds
9 may be placed automatically on consent agendas in committee, as they are usually
10 considered to be routine items, and this Resolution authorizes the acceptance and
11 expenditure of grant funding; now, therefore, be it

12 RESOLVED, That the Board of Supervisors hereby approves the acceptance and
13 expenditure of Department of Public Health of the State of California grants listed in the
14 “Recurring FY2022-2023 State Grants, Attachment A”; and, be it

15 FURTHER RESOLVED, That the Director of Health is authorized to enter into the
16 Agreement, and any amendments, invoices, or any other documents related to or required for
17 the administration of said Agreement on behalf of the City and County; and, be it

18 FURTHER RESOLVED, That the Director of Health is authorized to certify that DPH
19 has and will comply with all applicable federal and state statutory and regulatory requirements
20 related to any grant funds received; and, be it

21 FURTHER RESOLVED, That should Department of Public Health receive more money
22 or less money on any of the grants than is estimated in the “Recurring FY2022-2023 State
23 Grants, Attachment A”, that the Board of Supervisors hereby approves the acceptance and
24 expenditure by Department of Public Health of the additional or reduced money.
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1 Recommended:

Approved: /s/_____

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Mayor

3 /s/_____

4 Dr. Grant Colfax

Approved: /s/_____

5 Director of Health

Controller

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Program/ Sub-Program	Agency	Grant Type	State Contract Number	FY 22-23 Grant Term	FY 22-23 Grant Amount	FY 22-23 Indirect Costs	Indirect Cost Information	Match	In-kind	Subcontract Amount	Title, Services, FY 2022-23	Program Manager	Phone Number	Grant Code	Project code	Staff	Grant Status
1 Administration	CDPH - EPO	Federal Pass-through	17-10188	7/1/22 - 6/30/23	303,717		15,186 6.50398% of Personnel	-	-	1,419	Hospital Preparedness Program Grant funds the planning and coordination of hospital preparedness activities for health care facilities.	Amanda Kwong	(628) 206-7618	HCA11-23	10038137	Peter	Active
2 AIDS Office - Health Services	CA Dept. of Public Health (CDPH)	Federal Pass-through	18-10886	4/1/22 - 3/31/23	3,248,921		-	-	-	3,000,626	HIV Care Program - SAM HCP is a Two-tiered approach to service prioritization & delivery based on service categories defined by PHSA. Tier 1 services are outpatient & ambulatory medical care. Tier 2 support access to tier 1.	Bill Blum / Sajid Shaikh	415-255-3512	HCA016-23	10038050	Olivia	Pending
3 Center for Research	The Regents of the University of California	Federal Pass-through	8940c	4/1/23 - 3/31/24	14,026		1,502 12% of tdc	-	-		UCSF-GSI Technical Assistance in Strategic Information and Health Systems under NAM-PHACTS Dr. William McFarland will work with MCHSS, CDC Namibia and other partners to provide technical assistance in the implementation and completion of IBBS/PDI and / or other surveillance and survey activities.	W. McFarland / Sajid Shaikh	415-255-3512	HCA054-23	10038060	Jeanette	Pending
4 Center for Research	The Regents of the University of California	Federal Pass-through	8952c	6/1/23 - 5/31/24	19,558		1,778 10% of tdc	-	-		Western States Node of the National Drug Abuse Treatment SDPH will work in conjunction with the UCSF to provide the infrastructure for the Western States Node of the Nat'l Drug Abuse Treatment Clinical Trials Network.	P. Coffin / Sajid Shaikh	415-255-3512	HCA098-23	10038072	Jeanette	Pending
5 Epidemiology & Disease Control	CDPH Emergency Preparedness	State	17-10188	7/1/22-6/30/23	89,338		5,124 6.1% if personnel	-	-		CA Pandemic Influenza Preparedness Prepare for and respond to bioterrorism, infectious disease outbreaks, and other public health threats and emergencies.	Amanda Kwong	628-206-7618	HCD113-23	10038109	Elizabeth	Active
6 Center for Learning & Innovation	The Regents of the University of California	Federal Pass-through	10612x05	9/1/22 - 8/31/23	27,999		3,000 12% of tdc	-	-		UCSF-Gladstone Center for AIDS Research Provide assistance to UCSF's Mentoring Program.	J. Fuchs / Amanda Kwong	628-206-7618	HCD134-23	10038051	Jeanette	Pending
7 HD STD	California Department of Public Health	State	19-10557	7/01/22 - 6/30/23	268,666		48,384 25% personnel	-	-	18,480	Local Assistance for Core STD Management Implement evidence-based public health activities to proactively address Sexually Transmitted Diseases (STD) with local health jurisdiction (LHJ)	Maggie Han	628-206-7681	HCD142-23	10038095	Martin	Active
8 TB Control	California Department of Public Health	State	2190CTCA00	07/01/22 - 06/30/23	200,000		18,182 10% of total contract amount	-	-	181,818	Support Tuberculosis Prevention & Control Activities Local assistance funding to support tuberculosis (TB) prevention & control activities	Maggie Han	628-206-7681	HCD22-23	10038057	Martin	Active
9 Environmental Health	State of California - Office of Traffic Safety	Federal Pass-through	PS21014	10/1/22 - 9/30/23	100,000		-	-	-		Pedestrian and Bicycle Safety Program Best practice strategies will be conducted to reduce the number of persons killed and injured in crashes involving pedestrians and bicyclists.	Rita Nguyen	628-217-6155	HCEH16-23	10038078	Olivia	Pending
10 Primary Care	San Francisco Community Clinic Consortium	Federal Pass-through	H7CHA37299	1/1/22 - 12/31/22	75,700		-	-	-		HC LSYC Calendar Year 2022 Funding to support the provision of RWPC Early Intervention Services (EIS) services to persons living with HIV/AIDS.	Beth Neary	628-206-7679	HGCLSC-22	10037058	Sean	Active
11 Primary Care	San Francisco Community Clinic Consortium	Federal Pass-through	H76HA00163	1/1/23 - 12/31/23	75,700		-	-	-		HC LSYC Calendar Year 2023 Funding to support the provision of RWPC Early Intervention Services (EIS) services to persons living with HIV/AIDS.	Beth Neary	628-206-7679	HGCLSC-23	10038176	Sean	Active
12 Primary Care	San Francisco Community Clinic Consortium	Federal Pass-through	H80CS00049	1/1/22 - 12/31/22	1,255,850		-	-	-		HC McKinney Homeless Calendar 2022 Funding for the provision of health care services to the homeless	Beth Neary	628-206-7679	HGCMCK-22	10037060	Sean	Active
13 Primary Care	San Francisco Community Clinic Consortium	Federal Pass-through	H80CS00049	1/1/23 - 12/31/23	1,255,850		-	-	-		HC McKinney Homeless Calendar 2023 Funding for the provision of health care services to the homeless	Beth Neary	628-206-7679	HGCMCK-23	10038178	Sean	Active
14 Primary Care	San Francisco Community Clinic Consortium	Federal Pass-through	H7CHA37299	1/1/22 - 12/31/22	88,800		-	-	-		RWPC Tom Waddell Clinic Funding to support the provision of RWPC Early Intervention Services (EIS) services to persons living with HIV/AIDS.	Beth Neary	628-206-7679	HGCTW-22	10037061	Sean	Active
15 Primary Care	San Francisco Community Clinic Consortium	Federal Pass-through	H76HA00163	1/1/23 - 12/31/23	88,800		-	-	-		RWPC Tom Waddell Clinic Funding to support the provision of RWPC Early Intervention Services (EIS) services to persons living with HIV/AIDS.	Beth Neary	628-206-7679	HGCTW-23	10038179	Sean	Active
16 Center for Research	The Regents of the University of California	State	UFRA-278 (SFDPH-004c)	7/1/22 - 6/30/23	29,169		3,125 12% of tdc	-	-		GHS International Training Program-Mandel Dr. McFarland will coordinate training and technical assistance activities, assist in preparation of abstracts and presentations for international and regional AIDS conferences.	W. McFarland / Sajid Shaikh	415-255-3512	HCV14-23	10038067	Jeanette	Pending
17 MCH	CDPH-MCH Branch	Federal Pass-through	CHVP 21-38	7/1/22 - 6/30/23	1,128,429		29,779 3% of personnel	-	-		Nurse Family Partnership Nurses providing home visits with priority given to women with high risk factors to help women break the cycle of poverty and abuse.	Diane Beetham	415-575-5732	HCMC02-23	10038106	Elizabeth	Active
18 Environmental Health	CDPH-CLPB	Multiple funding sources	20-10543	7/1/22-6/30/23	683,016		74,516 15% of personnel costs	-	-		Local Case Management Contract Identify and manage cases of children with elevated lead levels in their blood.	Haroon Ahmad	415-252-3956	HCPB02-23	10038074	Olivia	Active
19 AIDS Office - Health Services	CDPH-OA-ADAP	State	15-10488 AO1	7/1/21 - 6/30/22	145,000		-	-	-		State AIDS Drug Assistance Program Administration of the AIDS Drug Assistance Program enrollment process provided by SFDPH and/or its subcontractors.	Kevin Hutchcroft/ Sajid Shaikh	415-437-6244	HOPD10-23	10026702 10001992 10001810 10001859	Sajid	Active
20 ARCHES	CDPH-Office of AIDS	State	19-10445	7/1/22 - 6/30/23	715,084		71,295 25% of personnel costs	-	-	225,000	State AIDS Surveillance Program HIV/AIDS Surveillance program provides precise & timely information necessary to identify ongoing patterns of infection & to measure the burden of the disease.	Sajid Shaikh	255-3512	HOPD14-23	10038112	Martin	Active
21 TB Control	CA Department of Public Health	State	2190BASE00 & 2190FSIE00	7/1/22 - 6/30/23	340,079		13,525 5% personnel	-	-		Tuberculosis Subvention To provide outreach and housing services for homeless tuberculosis patients and implement the "Directly Observed Therapy Program (DOT) for tuberculosis cases.	Maggie Han	628-206-7681	HCPD21-23	10038080	Martin	Active
22 Epidemiology & Disease Control	CDPH - Immunization Branch	Federal Pass-through	17-10345	7/1/22-6/30/23	3,093,929		-	-	-		Immunization Services Grant Administer an immunization program against nine vaccine preventable diseases and prenatal Hepatitis B services.	Amanda Kwong / Wesley Wong	628-206-7618 / 415-554-2669	HCPD29-23	10038171	Sean	Active
23 Epidemiology_PHEPR	CDPH Emergency Preparedness	Federal Pass-through	17-10188	7/1/22 - 6/30/23	567,173		27,759 5.9% of personnel	-	-	19,228	Health Preparedness & Response Prepare for and respond to bioterrorism, infectious disease outbreaks and other public health threats and emergencies.	Andrea Tenner/Amanda Kwong	628-206-7618	HCPD69-23	10038110	Elizabeth	Active
24 Epidemiology_PHEPR	CDPH Emergency Preparedness	Federal Pass-through	17-10188	7/1/22-6/30/23	188,642		9,053 5.8% of personnel	-	-	14,885	Cities Readiness Initiative Increase & enhance readiness to make effective use of the Strategic National Stockpile (SNS) in the event of several possible types of catastrophic terrorist attacks.	Andrea Tenner/Amanda Kwong	628-206-7618	HCPD95-23	10038111	Elizabeth	Active
25 Health Education-Health Promotion	DHS-Tobacco Section	State	CTCP-21-38	7/1/22-6/30/23	1,186,586		136,139 15% of personnel cost	-	-	135,354	Tobacco Free Project Provide Tobacco education in accordance with the State Comprehensive Tobacco Control Plan Guidelines for local lead agencies	Derek Smith	628-206-7640	HCPH01-23	10038082	Danna	Active
26 MCH	CDPH - MCH Branch	Federal Pass-through	202138	7/01/22 - 6/30/23	2,006,836		209,745 based on time study, and 25% of salary & fringe	-	-	419,301	Black Infant Health Program Provide outreach and referral services, pediatric care, education and follow-up support to African American pregnant & postpartum women and their infants.	Joshua Nossiter	558-4037	HCPM02-23	10038168	Sean	Active
27 MCH	CDPH - MCH Branch	Federal Pass-through	202138	7/1/22 - 6/30/23	8,344,237		1,237,298 25% personnel	10,241,909	-	630,198	Maternal and Child Health Coordination and advocacy for programs and services targeting women and children and review for fetal infant deaths.	Joshua Nossiter	558-4037	HCPM03-23	10038107	Elizabeth	Active
28 MCH	CDPH - CMS Branch	Federal Pass-through	21-01 & 21-03	7/1/22-6/30/23	1,738,652		215,808 25% of salary	590,403	-		CHDP/EPDOT Children's health and disability prevention services	Kimberlee Pitters	(628) 217-6713	HCPM05-23	10038147	Peter	Pending
29 MCH	CDPH (WIC)	Federal Pass-through	19-10182	10/1/22-9/30/23	8,028,039		-	-	-		WIC Program Nutrition, education, and supplemental foods to pregnant, lactating or post-partum women and to children under 5 years who are receiving on-going medical care	Pviti Rane	(415) 575-5716	HCPM08-23	10038138	Peter	Active
30 MCAH	CDPH	Federal Pass-through	19-10345	10/1/22-9/30/23	803,720		50,148 10% of Personnel Costs	-	-	404,161	Nutrition Network Project Project to increase nutrition education and physical activity targeted to California's under-served populations.	Pviti Rane	(415) 575-5716	HCPM13-23	10038140	Peter	Active
31 MCAH	CA Dept of Health Services/CMS	Federal Pass-through	21-02	7/1/22-6/30/23	772,983		-	-	-		Health Care Program-Children in Foster Care To provide health care program for children in foster care	Kimberlee Pitters	(415) 575-5764	HCPM14-23	10038141	Peter	Pending
32 Substance Use Disorder	Board of State & Community Corrections	State	553-19	2/16/23-5/15/23	48,000		2,000 5% of total direct project costs, excluding equip	-	-	40,000	STARs - Prop 47 Providing additional residential treatment beds, outpatient case management, and support services for criminal justice-involved adults with co-occurring substance use disorder and mental health issues	Angelica Almeida	415-255-3722	HCSA17-22	10037057	Peter	Active
33 CBHS - Mental Health	Ca Department of Rehabilitation	Federal Pass-through	30952	7/1/22 - 6/30/23	263,811		24,937 10% of personnel cost	818,875	-		State Vocational Rehabilitation Services Provide vocational rehabilitation services	Juan Ibarra	415-255-3496	HMDA04-23	10038120	Danna	Active
34 Mental Health	Department of State Hospitals	State	19-79007-000	9/15/22 - 9/30/23	710,029		64,548 10% direct charges	82,568	-	478,431	Pre-Trial Felony Mental Health San Francisco Pre Trial Felony	Mimi Fung	415-575-5719	HMM05-23	10038581	Danna	Active
35 CBHS Mental Health	CA Mental Health Svcs Oversight & Accountability	State	19MSHC0088	2/8/23 - 2/7/24	533,342		18,720 17.64% of direct cost	944,274	-	469,821	Early Psychosis Intervention (EPI) Mental Health Service Oversight and Accountability Commission	Mimi Fung	415-255-3667	HMM107-23	10038204	Danna	Active

36	CBHS-Mental Health	Mental Health Services Oversight & Accountability	State	21MHSOAC028	10/01/22-9/30/23	1,572,146	205,138	15% of total program cost	-	-	718,702	Improve Mental Health services in the subacute Health Service Oversight and Accountability Commission	Mental	Mimi Fung	415-255-3667	HM109-23	10038188	Danna	Active
37	Primary Care	Cal OES	Federal Pass-through	DR4344-P-0459	5/22/20 - 4/2/23	1,614,160	-	-	538,053	-	0	HMSG Castro Mission Renovation FEMA funds for the renovation of the Castro Mission Clinic		Kay Kim	415-554-2582	HMGP -	10031565	Elizabeth	Active
38	CBHS-Mental Health	Regents of The University of California	Federal Pass-through	10259u04	8/01/22-7/31/23	97,531	-	-	-	-	-	HRSA Title IV HIV Services - Center for Special Problems provides professional outpatient mental health services to women who have HIV and their adult family members.		Sajid Shaikh	415-255-3512	HMM005-23	10038120	Miguel	Active
39	CBHS-Mental Health	Dept of Health Care Svs. Mental Health	Federal Pass-through	Letter sent 8/4/2021	7/01/22-6/30/23	4,579,474	-	-	-	-	1,606,948	SAMSHA - MHSG, System of Care To provide timely access to appropriate care for severely mentally ill (SMI), dually diagnosed adults and seriously emotionally disturbed (SED) children and youth		Edwin Batongbatal	415-255-3446	HMM007-23	10038132	Miguel	Active
40	Bridge HIV	The Regents of the University of California	Federal Pass-through	113246c	4/1/22 - 3/31/23	45,046	3,217	12% of fdc	-	-	-	Evaluation of Doxydyline Post-Exposure Prophylaxis - DPH will oversee planning and implementation of the DoxyPrep study at SF CHS Clinic and supervise recruitment and retention.		S. Buchbinder / Sajid Shaikh	415-255-3512	PD111-23	10038092	Jeannette	Pending
41	Center for Research	The Regents of the University of California	Federal Pass-through	115806c	9/30/22 - 9/29/23	45,620	4,888	12% of midc	-	-	-	Recent Infection Surveillance Consortium - Dr. McFarland will provide high level technical assistance on surveillance strategy.		W. McFarland / Sajid shaikh	415-255-3512	PD113-23	10038062	Jeannette	Pending
42	Environmental Health	California Department of Justice	State	DOJ-PROPS6-2019-20-1-055	7/1/22 - 6/30/23	13,522	644	5% of total personnel services	-	-	-	DOJ Tobacco Grant Program This enforcement grant will allow SFPDPH to increase the Department's capacity for outreach and education, expand police decoy operations; eliminate illegal sales of tobacco; develop a protocol to investigate consumption; and to share data and knowledge.		Jon Callewaert	415-252-3971	PD116-23	10038172	Sean	Active
43	Center for Research	The Regents of the University of California	Federal Pass-through	116446c	9/30/22 - 9/29/23	7,603	814	12% of total direct costs	-	-	-	- Targeted HIV/TB Strategic Information Technical Assistance		W. McFarland / Sajid shaikh	415-255-3512	PD121-23	10038063	Jeannette	Pending
44	Center for Research	The Regents of the University of California	Federal Pass-through	116266c	9/30/22-9/29/23	45,620	4,888	12% of total direct costs	-	-	-	Targeted HIV/TB Strategic Information Technical Assistance - Burma - Dr. McFarland will provide technical assistance on HIV Surveillance activities and facilitate in-country training and workshops.		W. McFarland / Sajid shaikh	415-255-3512	PD123-23	10038064	Jeannette	Pending
45	HD STD	California Department of Public Health	State	19-10937	7/01/22 - 6/30/23	190,406	-	-	-	-	190,406	Hepatitis C Virus (HCV) Prevention and Control Activities Support Hepatitis C (HCV) elimination activities		Sajid Shaikh	255-3512	PD126-23	10038118	Martin	Active
46	Center for Learning & Innovation	The Regents of the University of California	State	UFRA-177	7/1/22 - 6/30/23	73,990	6,726	10 % direct cost	-	-	-	USCF FTB - Dr. Fuchs will serve as FTB CA team member, collective impact director, and policy research core lead for this project.		J. Fuchs / Amanda Kwong	628-206-7618	PD128-23	10038167	Miguel	Pending
47	HD STD	California Department of Public Health	State	19-10887	7/1/22 - 6/30/23	167,239	65,618	25% personnel	-	-	-	DFC Local Infrastructure Funds - Local Public Health Infrastructure to address infectious disease prevention and control by the local jurisdiction		Maggie Han	628-206-7681	PD131-23	10038119	Martin	Active
48	HD STD	California Department of Public Health	State	19-10791	7/01/22 - 6/30/23	204,805	11,459	25% personnel	-	-	-	STD Program Management and Collaboration Project - Implement public health activities to monitor, investigate, and prevent sexually transmitted diseases (STD)		Maggie Han	628-206-7681	PD132-23	10038182	Martin	Active
49	Environmental Health	California Department of Food and Agriculture	State	20-1013-000-5A	1/15/21 - 6/30/23	40,380	-	-	-	-	-	Noxious Weed Program - This project works to eradicate invasive sea lavender at all tidal marsh locations in the county.		Cree Morgan/Phil Calhoun	415-252-3950	PD136-23	10037404	Olivia	Active
50	Center for Research	The Regents of the University of California	Federal Pass-through	122636c	8/1/22 - 7/31/23	7,380	671	10% of total direct costs	-	-	-	Expanding Access to Buprenorphine Treatment among Homeless Persons with Opioid Use Disorder - Aiding with UCSF personnel, Dr. Coffin will perform the following tasks: 1. Assist Dr. Masson in designing interview guides, surveys, and refining recruitment procedures; 2. Assist Dr. Masson in engaging community partners in the proposed research including, directors of homeless shelters, syringe exchange access programs, and local health care providers, etc.		P. Coffin / Sajid Shaikh	415-255-3512	PD138-23	10038084	Jeannette	Pending
51	Environmental Health	California Department of Justice	State	Letter dated 12/31/2020	7/1/22 - 6/30/23	1,165,986	55,523	5% of total personnel services	-	-	124,496	DOJ Tobacco Grant Program This enforcement grant will allow SFPDPH to increase the Department's capacity for outreach and education, expand police decoy operations; eliminate illegal sales of tobacco; develop a protocol to investigate consumption; and to share data and knowledge.		Jon Callewaert	415-252-3971	PD150-23	10038175	Sean	Active
52	Center for Research	The Regents of the University of California	Federal Pass-through	125186c	9/30/22 - 9/29/23	18,779	2,012	12% of total direct costs	-	-	-	Nambia Project for HIS Strengthening, Continuous Quality Improvement and Enhanced Surveillance - Will, McFarland, MD, PhD, Director of Surveillance, has many years of experience working on surveillance in general and key populations, in both domestic and international settings. He will provide high-level technical assistance on surveillance strategy.		W. McFarland / Sajid shaikh	415-255-3512	PD154-23	10038068	Jeannette	Pending
53	Center for Research	The Regents of the University of California	Federal Pass-through	128556c	4/1/22 - 3/31/23	11,875	1,272	12% of total direct cost	-	-	-	International Traineeships in AIDS Prevention Studies (ITAPS)		W. McFarland / Sajid shaikh	415-255-3512	PD165-23	10038413	Jeannette	Pending
54	MCH	CDPH - Office of Oral Health	State	17-10719	7/1/22 - 6/30/23	308,879	2,376	17.25% of total personnel costs	-	-	234,000	Oral Health Program Prog 56 - Provide activities that support oral health plan and build capacity for the facilitation and implementation of education, prevention, linkage to treatment, surveillance, and case management services.		Prasanthi Patel	415-575-5706	PM101-23	10038169	Sean	Active
55	MCH	CDPH	State	19-10604	7/1/22 - 6/30/23	459,560	6,765	4% of total personnel costs	-	-	260,000	California Perinatal Equity Initiative - Deepen understanding of the gaps in services within the Black community contributing to increased infant mortality rates and the promising intervention to reduce Black infant mortality		Joshua Nositer/Aline Armstrong	558-4037	PM102-23	10038170	Sean	Active
56	MCH	CDPH	State	CHVP SGF INV 21-38	7/1/22 - 6/30/23	1,000,000	-	-	-	-	600,000	CHVP State General Fund Innovation - Implementing home visits as a primary intervention strategy for families from pregnancy through kindergarten to promote positive outcomes and family success.		Joshua Nositer/Diane Beetham	415-558-4037	PM103-23	10038108	Elizabeth	Active
57	MCH	CDPH	State	CHVP SGF EXP 22-38	7/1/22 - 6/30/23	329,075	61,015	25% of personnel	-	-	-	CHVP SGF Expansion - Grant expands Nurse Family Partnership (NFP) program.		Joshua Nositer/Maya Vasquez	415-558-4037	PM104-23	10038569	Elizabeth	Active
58	MCH	CDPH	Federal Pass-through	Letter dated 1/28/2022	7/1/22 - 6/30/23	395,500	39,550	10% of award	-	-	78,872	Children & Youth with Special Health Care Needs - CYSHCN - To support families of children with disabilities that will bring together the community agencies that serve children and youth with special health care needs in San Francisco independently of one another along with the families they are serving.		Ben Meisel	628-217-6711	PM105-23	10038574	Olivia	Active
59	CBHS-Mental Health	Department of Health Care Services (DHCS)	State	Letter dated 10/04/2021	7/1/22-6/30/23	636,880	-	-	-	-	52,000	Crisis Care Mobile Units (CCMU) Program - Department of Health Care Services		Mimi Fung	415-255-3667	HM111-23	10038209	Danna	Pending
60	CBHS-Mental Health	Department of Health Care Services (DHCS)	Federal Pass-through	Letter dated 12/06/2021	7/1/22-6/30/23	926,594	-	-	-	-	262,499	Behavioral Health Response and Rescue Project (BHRPP) for Community Mental Health Services Block Grant (MHBG) - Coronavirus Response and Relief Supplemental Appropriations Act (CRRSAA) - Department of Health Care Services		Shirley Giang/Mimi Fung	415-255-3667	HM112-23	10038426	Danna	Pending
61	CBHS-Mental Health	Department of Health Care Services (DHCS)	Federal Pass-through	Letter dated 12/06/2021	7/1/21-12/31/22	1,508,181	-	-	-	-	1,279,431	Behavioral Health Response and Rescue Project (BHRPP) for Community Mental Health Services Block Grant (MHBG) - Coronavirus Response and Relief Supplemental Appropriations Act (CRRSAA) - Department of Health Care Services		Shirley Giang/Mimi Fung	415-255-3667	HM113-23	10038378	Danna	Pending
62	Substance Abuse	CA Dept of Health Care Services	Federal Pass-through	Letter dated 11/15/2021	7/1/22 - 12/31/22	2,174,300	-	-	-	-	2,174,300	CRESAA- SABG - Provides children Strengthening Families Services, Community Outreach and education, and Campaign & Website development. Team Lily partnered with UCSF. Provide transitional housing for SUD.		Mimi Fung/Judith Martin	(415) 255-3667	SA101-23	10038563	Peter	Pending
63	Substance Abuse	CA Dept of Health Care Services	Federal Pass-through	Letter dated 11/15/2021	1/1/23 - 6/30/23	664,393	-	-	-	-	499,336	ARPA - SABG - Provides children Strengthening Families Services, Community Outreach and education, and Campaign & Website development. To support a SORT program to provide treatment services for SUD clients		Mimi Fung/Judith Martin	(415) 255-3667	SA102-23	10038322	Peter	Pending
64	PH&P	CDPH	Federal Pass-through	WFD-038	7/1/22 - 6/30/23	1,189,498	192,630	25% personnel	-	-	-	Public Health Workforce Development - To establish, expand, train, and sustain the SLT public health workforce to support jurisdictional COVID-19 prevention, preparedness, response, and recovery initiatives, including school-based health programs.		Amanda Kwong / Andrea Tenner	(628) 206-7618	PD168-23	10038774	Peter	Pending
						53,544,143	2,946,757				14,302,294								

Item	Title, Services, FY 2019-20	Subcontract Amount	Contractor Name Nature of the Contract	Address	Executive Director	Board Member Name
1	Hospital Preparedness Program Grant funds the planning and coordination of hospital preparedness activities for health care facilities	1,419	San Francisco Public Health Foundation Fiscal Intermediary	1 Hallidie Plaza, Suite 808 San Francisco, CA 94102	Penny Eardley	Penny Eardley, Anastasiya Petrosova, Kelisa Tostelegese, Kitty Thornton, Laura Campos, Jehnifer Mikalacki-Sublett, Christy Cather, Nicole Falk, Ayanna Bennett, Elizabeth Longstreth, Courtney Lyles, Melissa Moore, Alice Villagomez, Adam Sharma, Mark Morewitz, Nick Oxford
2	HIV Care Program - SAM HCP is a Two-tiered approach to service prioritization & delivery based on service categories defined by HRSA. Tier 1 services are outpatient & ambulatory medical care. Tier 2 support access to tier 1.	240,656	a) Dolores Street Community Services To improve and maintain the health of our residents through the provision of facility-based health care and other supportive services.	938 Valencia Street, San Francisco, CA 94110	Laura Valdez	PRESIDENT: Michael Winn; VICE-PRESIDENT: Rocío Avila; TREASURER: Kani Lin; SECRETARY: Pedro Hernandez; Anjali Cameron; Ward Penfold; Anat Leonard
		174,783	b) Catholic Charities - Leland House To provide attendant care services in compliance with the Standard of Care for Client Centered Services to multiply diagnosed individuals at Leland House an RCF-CI program in San Francisco with a special focus on the unique needs of persons living with HIV/AIDS.	890 Eddy Street, San Francisco, CA 94109	Jilma Meneses, JD	Archbishop Salvatore J. Cordileone, Chairman; Joe Boerio, President; Theodore Borromeo, Secretary; Kathleen A. Grogan, CPA, Secretary; George B. Sundby, Treasurer; Dr. Diana I. Bojorquez; Martha Brigham, Philip Clark; Adriana Dahik; Susie O'Brien Frimet; Jerilyn Gelt; Michael M. Ghilotti; Eleanor Gonzalez; David R. Hultman; Lisa Ikeda; Philip Kearney; Scott Landis; Jay Paul Leupp; Sister Maureen McInerney, O.P.; Lori Mirek; Reverend Dan Nascimento; Jack Pohman; Reverend Raymond Reyes; Louis Reynaud; Jim Sangiacomo; Patrick Woody
		180,336	c) Catholic Charities - Peter Claver To provide attendant care services in compliance with the Standard of Care for Client Centered Services to multiply diagnosed individuals at Peter Claver Community an RCFCI program in San Francisco with a special focus on the unique needs of persons living with HIV/AIDS.	1340 Golden Gate Ave, SF, CA 94115	Jilma Meneses, JD	Archbishop Salvatore J. Cordileone, Chairman; Joe Boerio, President; Theodore Borromeo, Secretary; Kathleen A. Grogan, CPA, Secretary; George B. Sundby, Treasurer; Dr. Diana I. Bojorquez; Martha Brigham, Philip Clark; Adriana Dahik; Susie O'Brien Frimet; Jerilyn Gelt; Michael M. Ghilotti; Eleanor Gonzalez; David R. Hultman; Lisa Ikeda; Philip Kearney; Scott Landis; Jay Paul Leupp; Sister Maureen McInerney, O.P.; Lori Mirek; Reverend Dan Nascimento; Jack Pohman; Reverend Raymond Reyes; Louis Reynaud; Jim Sangiacomo; Patrick Woody
		1,408,026	d) Project Open Hand To improve the nutritional health of all people living with HIV/AIDS through prepared meals, groceries, nutrition assessments and other food and nutrition services.	730 Polk St, SF, CA 94109	Paul Hepfer	Chair: Mike Henry; Vice-Chair: Ruth Yankoupe; Secretary: Finance Committee Chair: John Colton; Aditya Wakankar; Vishwa Chandra; Jennifer Petraglia; Andrew Chang, Preston Maring; Ginny McSwine; Theresa Ng Chang; Andrea Wilkinson; Helene York; Jennifer Drimmer-Rokovich; Richard Long, Arthur Wood;
		681,216	e) Main AIDS Hospice To provide safe housing, medical care and nutrition supports for those with HIV at end of life and those needing respite to return to independence as defined by the resident.	401 Duboce Ave, SF, CA 94117	Michael Smithwick	Ray Lapointe; Jane Wong; Austin Miller; Gregg Cummings; Jim King; Johannes Casados; Bismay Mishra; Donna Cummings; Namita Dilawri; Sameera Rana;
		146,772	f) PRC Providing Equal Access to Health Care Program Services	170 9th St, San Francisco, CA 94103	Brett Andrews	Brian Schneider; Kent M. Roger; Tim Schroder; Chris Brown; Larkin Callaghan; Josh Freiman; Nelson Gonzalez; Ryo Ishida; Jacques Michaels; Michael Niczyporuk; Zack Papillon; Darren Smith; Michael Steinberg; Meredith Treaster; Brett Andrews, CEO; Joe Alout, CFO; Elaine Clark, CFO; John Foster, CCO; Tasha Henneman, Chief; Chuan Teng, Chief; Randi Paul, CDO.
		168,837	g) UCSF Alliance Health Project The program goal is to provide outpatient mental health services to people living with HIV - including Long-Term Survivors - to reduce symptoms and functional impairments resulting from mental health and/or substance use disorders.	1930 Market St, SF, CA 94102	James W. Diley, MD	James W. Diley, MD, Lori Thoemmes; Anessa Flenje, PhD; Braulio Garcia; DK Haas; Ramón Matos, LMF; Jessie Murphy, MPH; Perry Rhodes, III; Jen Shockey, MPH; Holly Wong; Kate Shumate; Susan M. Bresal, PhD; Brad Hare, MD; Reginald Hillman; Enchi Liu, PhD; Dr. Bérénice Mettler; Ken Pearce, Secretary; Sophia Toh, Vice-Chair
7	Local Assistance for Core STD Management To provide local assistance funding to local health jurisdictions to build local infrastructure and workforce capacity to conduct STD surveillance and implement evidence-based effective interventions to reduce the transmission and negative health effects of sexually transmitted infections	18,480	Harm Reduction Therapy Center Provide Clinical Consultation Services to LINC frontline staff	45 Franklin Street San Francisco, CA 94102	Jeannie Little	Shantel Weingard, CFO; Sam Dennison; Ale Dal Pinal; Alice Jia Son; Roy Tidwell; Patt Denning, PhD; Jeannie Little, LCSW
8	Support Tuberculosis Prevention & Control Activities Local assistance funding to support tuberculosis (TB) prevention & control activities	181,818	San Francisco Public Health Foundation Fiscal Intermediary Svc for California TB Controller's Association	375 Laguna Honda Blvd #8303, San Francisco, CA 94116	Penny Eardley	Penny Eardley, Anastasiya Petrosova, Kelisa Tostelegese, Kitty Thornton, Laura Campos, Jehnifer Mikalacki-Sublett, Christy Cather, Nicole Falk, Ayanna Bennett, Elizabeth Longstreth, Courtney Lyles, Melissa Moore, Alice Villagomez, Adam Sharma, Mark Morewitz, Nick Oxford
20	State AIDS Surveillance Program HIV/AIDS Surveillance program provides precise & timely information necessary to identify ongoing patterns of infection & to measure the burden of the disease.	225,000	Heluna Health Providing program administration and support services - Fiscal Intermediary	13300 Crossroads Parkway, Suite 450, City of Industry, CA 91746	Blayne Cutler, MD, PhD	Blayne Cutler, MD, PhD, CEO; Tim Selfert, JD, CHRO; Peter Dale; Jordan Gadd, MA; Jo Kay Ghosh, PhD, CPO, Brian Gieseler, CFO; Elizabeth Power Robison, MBA; Kiran Saluja; Robert R. Jenks, MBA; Tamara Joseph, JD; Alex Baker, MBA; Carladenise Edwards, PhD, Edward Yip, JD; Georgia Casciato, FACHE; Jean C. O'Connor, JD, MPH, DrPH, FACHE; Santosh Veticaden, MD, PhD, MBA; Sarah Mullen Rich, MBA; Scott Flier, MPH, MBA; Susan De Santi, PhD; Von Nguyen, MD, MPH, Nicole J. Macarthur, JD; Vivian Vasallo; Celina Gorre; Bonnie Midura, MPH;
23	Health Preparedness and Response Prepare for and respond to bioterrorism, infectious disease outbreaks, and other public health threats and emergencies	19,228	San Francisco Public Health Foundation Fiscal Intermediary	1 Hallidie Plaza, Suite 808 San Francisco, CA 94102	Penny Eardley	Penny Eardley, Anastasiya Petrosova, Kelisa Tostelegese, Kitty Thornton, Laura Campos, Jehnifer Mikalacki-Sublett, Christy Cather, Nicole Falk, Ayanna Bennett, Elizabeth Longstreth, Courtney Lyles, Melissa Moore, Alice Villagomez, Adam Sharma, Mark Morewitz, Nick Oxford
24	Cities Readiness Initiative Increase & enhance readiness to make effective use of the Strategic National Stockpile (SNS) in the event of several possible types of catastrophic terrorist attacks.	14,885	San Francisco Public Health Foundation Fiscal intermediary	1 Hallidie Plaza, Suite 808 San Francisco, CA 94102	Penny Eardley	Penny Eardley, Anastasiya Petrosova, Kelisa Tostelegese, Kitty Thornton, Laura Campos, Jehnifer Mikalacki-Sublett, Christy Cather, Nicole Falk, Ayanna Bennett, Elizabeth Longstreth, Courtney Lyles, Melissa Moore, Alice Villagomez, Adam Sharma, Mark Morewitz, Nick Oxford
25	Tobacco Free Project Provide tobacco education in accordance with the State Comprehensive Tobacco Control Plan Guidelines for local lead agencies.	135,354	San Francisco Public Health Foundation Providing program administration in support of SF Tobacco Free Project.	1 Hallidie Plaza, Suite 808 San Francisco, CA 94102	Penny Eardley	Penny Eardley, Anastasiya Petrosova, Kelisa Tostelegese, Kitty Thornton, Laura Campos, Jehnifer Mikalacki-Sublett, Christy Cather, Nicole Falk, Ayanna Bennett, Elizabeth Longstreth, Courtney Lyles, Melissa Moore, Alice Villagomez, Adam Sharma, Mark Morewitz, Nick Oxford
26	Black Infant Health Program Provide outreach and referral services, pediatric care, education and follow-up support to African American pregnant & postpartum women and their infants.	419,301	HealthRight 360 Fiscal Intermediary	1563 Mission St, SF, CA 94103	Dr. Vitka Eisen	Vitka Eisen; Tony Duong; Jegan Anandasakaran; Ana Valdez; Demetrius Andreas; Maribel Baez, MS-BA; Dylan Gattridge; Evan Hoesse; Britt Miazgowicz; Anna-Cristina Navarro; Alyssa Roy; Shabana Siegel; April Torres; Denise Williams; Diane Ireland; Natalie Mitchell; Linda Smart; Daniel Binder; Yelen Balan; Natalie Beaulieu; Bryan Graham; Chris Gurley; Kathryn Holmes; Raquel Macfarlane; Talia Pierluissi; Karen E. Painter; Alex Pugh; Ahmed Thomas; Timothy Torres; Sankar Venkatraman
27	Maternal and Child Health Coordination and advocacy for programs and services targeting women and children and review of fetal infant deaths.	499,118	a) Heluna Health Provide support for Expecting Justice Program	13300 Crossroads Parkway, Suite 450, City of Industry, CA 91746	Blayne Cutler, MD, PhD	Blayne Cutler, MD, PhD, CEO; Tim Selfert, JD, CHRO; Peter Dale; Jordan Gadd, MA; Jo Kay Ghosh, PhD, CPO, Brian Gieseler, CFO; Elizabeth Power Robison, MBA; Kiran Saluja; Robert R. Jenks, MBA; Tamara Joseph, JD; Alex Baker, MBA; Carladenise Edwards, PhD, Edward Yip, JD; Georgia Casciato, FACHE; Jean C. O'Connor, JD, MPH, DrPH, FACHE; Santosh Veticaden, MD, PhD, MBA; Sarah Mullen Rich, MBA; Scott Flier, MPH, MBA; Susan De Santi, PhD; Von Nguyen, MD, MPH, Nicole J. Macarthur, JD; Vivian Vasallo; Celina Gorre; Bonnie Midura, MPH;
		131,080	b) Felton Institute Provide support for TAPP program	1500 Franklin Street, San Francisco, CA 94109	AI Gilbert	Adriana Furuzawa, MFT, CPRP; Kenj Paschen; Curtis Penn; Catherine Spensley, MSW, LCSW; AI Gilbert, President; Marvin Davis, CFOO; Liz Dalmao-Julien, CPO; Dr. Robin Ortiz; Dr. Yohana Quiroz, COO; Darren Skolnick; Michael N. Hofman; Susan Bobulsky; Daniel Costello; Terry M. Limpert; Kathy Neal; Michael O'Leary; Peter Rolo; Tamara Steele; Dr. Georina Woods
30	Nutrition Network Project Project to increase nutrition education and physical activity targeted to California's under-served populations.	35,000	a) 18 Reasons Provide outreach to targeted populations	3150 18th Street, #315, San Francisco, CA 94110 (Mail) 3674 18th Street, SF, CA 94110 (Visit)	Sarah Nelson	Patricia Farrar-Rivas; Shannon White Cogen; Bob Roemer; Aaron Hardisty; Marian Zischke Batsch; Isaac Buwembo; Sam Mogannam; Sarah Nelson; Suzy Obst; Poonam Singh; Maggie Spicer; Rosabel Tao; Calvin Tsay; Sarah Wiggelsworth;
		215,000	b) San Francisco Unified School District Provide outreach to targeted populations	555 Franklin Street, San Francisco, CA 94102	Dr. Vincent Matthews, Superintendent	Superintendent Vincent Matthews, Ed.D.; Myong Leigh, Deputy Superintendent; Enikia Ford Morthel, Deputy Superintendent; Gentle Blythe, Deputy Superintendent; Jenny Lam, President; Kevin Boggess, Vice President; Matt Alexander, Commissioner; Ann Hu, Commissioner; Laine Motamed, Commissioner; Mark Sanchez, Commissioner; Lisa Weissman-Ward, Commissioner
		14,161	c) San Francisco Public Health Foundation Fiscal intermediary	1 Hallidie Plaza, Suite 808 San Francisco, CA 94102	Penny Eardley	Penny Eardley, Anastasiya Petrosova, Kelisa Tostelegese, Kitty Thornton, Laura Campos, Jehnifer Mikalacki-Sublett, Christy Cather, Nicole Falk, Ayanna Bennett, Elizabeth Longstreth, Courtney Lyles, Melissa Moore, Alice Villagomez, Adam Sharma, Mark Morewitz, Nick Oxford
		140,000	d) Children's Council of San Francisco Provide outreach to targeted populations	445 Church Street, San Francisco, CA 94114	Gina M. Fromer	Anna Nordberg (Chair); Deborah Sims (Vice Chair); Marga Dusedau (Treasurer); Brandy Vau (Secretary); Ashley Murphy; Fatima Moore; Maegan Warehouse; Charmaine Pattinson; George Israel; Na'eem Salaam; Chris Thomas; Jake Lewinson; Omar Butler; Dominique Benavidez; Jessica Hilberman; Peter Rosberg; Elisabeth Diana; Jim Kirk; Victoria Fram; Ferris Pace

32	Supporting Treatment and Reducing Recidivism (STARR) - PROP 47 To provide additional Substance Use Disorder treatment services for individuals who have been arrested for, charged with, or convicted of a criminal offense	40,000	Hatchuel Tabernik & Associates Inc Provide program evaluation services	2560 9th St., Suite 211, Berkeley, CA 94710	Tim Tabernik	Tim Tabernik, CEO; Dina Hatchuel, Danielle Toussaint, PhD; Russ Lobar, CFO, Sarah DeWitt Akin.
34	Pre-Trial Felony Mental Division Program To implement and demonstrate the effectiveness of a pre-trial diversion program specifically geared to individuals with specific serious mental disorders who have been charged with at least one felony.	351,543	a) University of California, San Francisco Conduct a new comprehensive client assessment and produce a modified Treatment Plan	550 16th Street, 7th Floor, San Francisco, CA 94143	Sam Hawgood	Philip Hammarskjold, Chair; Andrew Ballard; Peter Briger; Todd Carter; Connie E. Chen; Fred Cohen; Phyllis Coulter; Dipanjan Deb; Dana Emery; William S. Fisher; Catherine Friedman; Sameer Gandhi; Kathryn Hall; Kenneth Hao; Julia Hartz; Carl Kawaja; Michael Kahn; Richard Kimball; Meyer Malka; Ian McKinnon; Diane Morris; Lisa Stone Pritzker; Steven Reed; Ruchi Sanghvi; George Scangos; Shahar Soghikian; Joan Weil; Barbara Bass Bakar; Lynne Benioff; William H. Davidow; Arthur H. Kern; George Marcus; Carmen Policy; Richard M. Rosenberg; Jaclyn Saifer; Brook H. Byers; Kenneth T. Darr; Doris F. Fisher; Robert B. Friend; Ellen Magnin Newman, Founding Chair; William E. Oberndorf; Diane B. Wilsey.
		126,888	b) HealthRight 360 Provide fiscal intermediary check-writing services	1563 Mission St. SF, CA 94103	Dr. Vitka Eisen	Vitka Eisen; Tony Duong; Jegan Anandasakaran; Ana Valdes; Demetrius Andreas; Maribel Baez, MS-HA; Dylan Gattridge; Evan Hoesie; Britt Mazgowicz; Anna-Cristina Navarro; Alyssa Roy; Shabana Siegel ; April Torres; Denise Williams; Diane Ireland; Natalie Mitchell; Linda Smart; Daniel Binder; Yelen Balan; Natalie Beaulieu; Bryan Graham; Chris Gurley; Kathryn Holmes; Raquel Macfarlane; Talia Pierluissi; Karen E. Pointer; Alex Pugh; Ahmad Thomas; Timothy Torres;
35	Early Psychosis Intervention Plus It's intended to support the statewide development and expansion of a Coordinated Specialty Care model, and evidence-based and integrated EPI model.	469,821	Felton Institute Provide program support	1500 Franklin Street, San Francisco, CA 94109	Al Gilbert	Adriana Furuzawa, MFTI, CPRP; Kenji Paschen; Curtis Penn; Catherine Spensley, MSW, LCSW; Al Gilbert, President; Marvin Davis, CFOO; Liz Dalmacio-Julien, CPO; Dr. Robin Ortiz; Dr. Yohana Quiroz, COO; Darren Skolnick; Michael N. Hofman; Susan Bobutsky; Daniel Costello; Terry M. Limpert; Kathy Neal; Michael Orias; Peter Rojo; Tamara Steele; Dr. George Woods
36	Mental Health Student Act of 2019 Improve Mental Health services in the schools To improve mental health services for students and propose services include	270,500	a) Seneca Family of Agencies Fiscal Intermediary	8945 Golf Links Rd, Oakland, CA 94605	Leticia Galyean	Neil Gilbert, Chair; Leticia Galyean, President; Dion Aroner, Secretary; Geoffrey Le Plastrier, Treasurer; Rochelle "Shelley" Benning, Member; Jeff Davi, Member; Gwen Foster, Member; Sylvia Pizzini, Member; Nancy Peña, Member; Jamie Church; Jason Citron; Zach Cohen; Zach Hill; Venus Ke; Anders Mortensen; Dwayne Redmon; Hong Thatot; Stephanie Gaywood
		407,502	b) 3rd Street Youth Center & Clinic Fiscal Intermediary	1728 Bancroft Ave, San Francisco, CA 94124	Joi Jackson-Morgan	Michelle Magee; Lyslynn Lacoster; Jackie Ryleya; Laura Fallon; Savitha Moorthy; Misty Patton; Herschel Leland; Glen Kunene; Vanessa Eng; Jose A Rodriguez; Michael Savage.
39	SAMSHA - MHBG, System of Care To provide timely access to appropriate care for severely mentally ill (SMI), dually diagnosed adults and seriously emotionally disturbed (SED) children and youth	40,700	c) TBD	TBD	TBD	TBD
		247,302	a) Richmond Area Multi-Services Provide Peer Internship Program that prepares clients for employment in peer support and counseling positions	3626 Balboa St. SF, CA 94124	JayVon Muhammad	JayVon Muhammad, CEO; Domenica Giovannini, MPH; Christina Shea; Angela Tang; Eduard Agajanian, MBA; Trina De Joya; Sachi Inoue; Carmen Castorena O'Keefe; Flora Chan, Psy.D; Hasian Sinaga; Dennielle C. Kronenberg; Anna Zozulinsky; Janny Wong; Kristin Chun; Vivian Wong; Rebecca Peng; Cynthia Huie; Marjorie Scholtz; Anoshua Chaudhuri; Lee Hsu; Maggie Roberts; Tom Yeh; Wade Chow and Maire Quinn
		20,000	b) Felton Institute Provides mental health technical assistance to community based MH crisisresponse to trauma	1500 Franklin Street, San Francisco, CA 94109	Al Gilbert	Adriana Furuzawa, MFTI, CPRP; Kenji Paschen; Curtis Penn; Catherine Spensley, MSW, LCSW; Al Gilbert, President; Marvin Davis, CFOO; Liz Dalmacio-Julien, CPO; Dr. Robin Ortiz; Dr. Yohana Quiroz, COO; Darren Skolnick; Michael N. Hofman; Susan Bobutsky; Daniel Costello; Terry M. Limpert; Kathy Neal; Michael Orias; Peter Rojo; Tamara Steele; Dr. George Woods
		61,488	c) Behavioral Health Commission Support Administrative oversight of system-of-care fiscal intermediary funding in order to maintain level of funding for training	1380 Howard Street, San Francisco, CA 94103	Helynna Brooke	Carletta Jackson-Lane, JD, Co-Chair; Richelle Lee Siot, MA; Bahlam Javier Vigil, Vice Chair; Stephen Banuelos; Secretary; Judy Zallard Drummond; Judith Klein; Toni Parks; Harriette Stallworth Stevens; Utash Thakore-Dunlap; Wilson Idell; Terese Bueher; Sempel Ashel; Alshah Sraf
		13,732	d) San Francisco Study Center Peer wages for consumers participating in running a coffee service at the OMI Mental Health Clinic	1663 Mission Street, Suite 310, San Francisco, CA 94103	Geoffrey Link	Richard Livingston; Tina Tong Yee, Ph.D.; Reiko Homma True, Ph.D.; Hazim Elbgal; Eric Eldon; Benjamin A. Kutnick; Jeanne Kwong; Stas Margaronis; Jim McWilliams; Geoffrey Link; Jaden Chen; John Nunez; Leonor Vera; Linda Kuo; Irene Soriano; Marjorie Beggs; Lise Stampfl
		114,273	f) Curry Senior Center Provides support for older adults with mental health issues and are homeless or risk of losing their houses	333 Turk Street, San Francisco, CA 94102	David Knego	Jonnie Davila, President; Shirely Cutiga, Vice President; Diane Sklar, MD; David Bickham, Treasurer; Arielle Slam; Julie Valente; Alycia Norton; Pattie Pritchett; Diane Dwyer; Richard Sullivan; Hannah Lineocum; Sasha Selva; Ja Eun Guerrero Huh, LCSW; Wendy Zachary, MD; Jim Illig; Yael Wulfovitch; John McKinnon
		142,000	g) HealthRight 360 Provides Fiscal Intermediary services	1563 Mission St, SF, CA 94103	Dr. Vitka Eisen	Vitka Eisen; Tony Duong; Jegan Anandasakaran; Ana Valdes; Demetrius Andreas; Maribel Baez, MS-HA; Dylan Gattridge; Evan Hoesie; Britt Mazgowicz; Anna-Cristina Navarro; Alyssa Roy; Shabana Siegel ; April Torres; Denise Williams; Diane Ireland; Natalie Mitchell; Linda Smart; Daniel Binder; Yelen Balan; Natalie Beaulieu; Bryan Graham; Chris Gurley; Kathryn Holmes; Raquel Macfarlane; Talia Pierluissi; Karen E. Pointer; Alex Pugh; Ahmad Thomas; Timothy Torres;
		150,266	h) RAMS Provides support of consumer-run centers serving newly dually-diagnosed individuals	3626 Balboa St, SF, CA 94124	JayVon Muhammad	JayVon Muhammad, CEO; Domenica Giovannini, MPH; Christina Shea; Angela Tang; Eduard Agajanian, MBA; Trina De Joya; Sachi Inoue; Carmen Castorena O'Keefe; Flora Chan, Psy.D; Hasian Sinaga; Dennielle C. Kronenberg; Anna Zozulinsky; Janny Wong; Kristin Chun; Vivian Wong; Rebecca Peng; Cynthia Huie; Marjorie Scholtz; Anoshua Chaudhuri; Lee Hsu; Maggie Roberts; Tom Yeh; Wade Chow and Maire Quinn
		330,014	i) Family Services Agency Provides services First Episode Psychosis, families suffering from signs & symptoms of schizophrenia	1500 Franklin Street, San Francisco, CA 94109	Al Gilbert	Sandra Smith, Darren Skolnick, Gretchen Eichinger, Amy Solday, Christopher Seaman, Michael N. Hofman, Dr. Michelle Clark, Yasmine Rafidi, Paul Adams, Susan Bobutsky, Terry M. Limpert, Michael Orias, Peter Rojo, Matt Snyder, Tamara Steele, Al Gilbert, CEO, Marvin Davis, CFO, Liz Dalmacio-Julien, CPO, Dr. Robin Ortiz, Yohana Quiroz, COO, Adriana Furuzawa, Kenji Paschen, Curtis Penn, Catherine Spensley, MSW, LCSW, Joseph A. Thompson, Ph.D.
		249,691	j) RAMS Provides Peer Internship Program that prepares clients for employment in peer support and counseling	3626 Balboa St, SF, CA 94124	JayVon Muhammad	JayVon Muhammad, CEO; Domenica Giovannini, MPH; Christina Shea; Angela Tang; Eduard Agajanian, MBA; Trina De Joya; Sachi Inoue; Carmen Castorena O'Keefe; Flora Chan, Psy.D; Hasian Sinaga; Dennielle C. Kronenberg; Anna Zozulinsky; Janny Wong; Kristin Chun; Vivian Wong; Rebecca Peng; Cynthia Huie; Marjorie Scholtz; Anoshua Chaudhuri; Lee Hsu; Maggie Roberts; Tom Yeh; Wade Chow and Maire Quinn
273,182	k) RAMS Provides Bilingual-designated counselor positions	3626 Balboa St, SF, CA 94124	JayVon Muhammad	JayVon Muhammad, CEO; Domenica Giovannini, MPH; Christina Shea; Angela Tang; Eduard Agajanian, MBA; Trina De Joya; Sachi Inoue; Carmen Castorena O'Keefe; Flora Chan, Psy.D; Hasian Sinaga; Dennielle C. Kronenberg; Anna Zozulinsky; Janny Wong; Kristin Chun; Vivian Wong; Rebecca Peng; Cynthia Huie; Marjorie Scholtz; Anoshua Chaudhuri; Lee Hsu; Maggie Roberts; Tom Yeh; Wade Chow and Maire Quinn		
5,000	l) RAMS Peer wages for consumers participating in running a coffee service at the OMI Mental Health Clinic - job training wages	3626 Balboa St, SF, CA 94124	JayVon Muhammad	JayVon Muhammad, CEO; Domenica Giovannini, MPH; Christina Shea; Angela Tang; Eduard Agajanian, MBA; Trina De Joya; Sachi Inoue; Carmen Castorena O'Keefe; Flora Chan, Psy.D; Hasian Sinaga; Dennielle C. Kronenberg; Anna Zozulinsky; Janny Wong; Kristin Chun; Vivian Wong; Rebecca Peng; Cynthia Huie; Marjorie Scholtz; Anoshua Chaudhuri; Lee Hsu; Maggie Roberts; Tom Yeh; Wade Chow and Maire Quinn		
45	Hepatitis C Virus (HCV) Prevention and Control Activities Support hepatitis C (HCV) elimination activities for populations at risk of forward transmission.	95,203	a) Facente Consulting Professional consultation and technical Assistance for Strategic Planning	13300 Crossroads Parkway, Suite 450, City of Industry, CA 91746	Shelley Facente	Shelley Facente; Autumn Albers; William Bland; Katie Burk; Sara Duran; Dara Gacheler; Meghan Hynes; Lazara Paz-Gonzalez, MPH; Perry Rhodes III, MA; JT Taylor, MPP/MPH
		95,203	b) Shanti Provides Hepatitis C prevention services	730 Polk Street, 3rd Floor San Francisco, CA 94109	Kaushik Roy	William L. Dawes, Jamie Ennis, Jerry Francone, Sheila Fischer Kiernan, Micki Klearman, MD, John Sell; Ethan M. Sullivan; Chip Supanich; Marc Weinstein; Josh Weinstein; Stanley Yee; Kaushik Roy; Charlie Meade; Patricia J. Schneider
48	STD Program Management and Collaboration Project Implement public health activities to monitor, investigate, and prevent sexually transmitted diseases (STD)	146,582	University of California, San Francisco Technical Assistance: HIV Global Health	550 16th Street, 7th Floor, San Francisco, CA 94143	Sam Hawgood	Philip Hammarskjold, Chair; Andrew Ballard; Peter Briger; Todd Carter; Connie E. Chen; Fred Cohen; Phyllis Coulter; Dipanjan Deb; Dana Emery; William S. Fisher; Catherine Friedman; Sameer Gandhi; Kathryn Hall; Kenneth Hao; Julia Hartz; Carl Kawaja; Michael Kahn; Richard Kimball; Meyer Malka; Ian McKinnon; Diane Morris; Lisa Stone Pritzker; Steven Reed; Ruchi Sanghvi; George Scangos; Shahar Soghikian; Joan Weil; Barbara Bass Bakar; Lynne Benioff; William H. Davidow; Arthur H. Kern; George Marcus; Carmen Policy; Richard M. Rosenberg; Jaclyn Saifer; Brook H. Byers; Kenneth T. Darr; Doris F. Fisher; Robert B. Friend; Ellen Magnin Newman, Founding Chair; William E. Oberndorf; Diane B. Wilsey.
49	Noxious Weed Program This project works to eradicate invasive sea lavender at all tidal marsh locations in the county.	36,000	California Invasive Plant Council To restore specified marshes by replanting native cordgrass and marsh gumplant.	1442-A Walnut St. #462, Berkeley, CA 94709	Doug Johnson	Drew Kerr, Vice President; Juli Matos, President; Sarah Godfrey, Treasurer; Amanda Cantu Swanson, Secretary; Jason Giessow; Steven Addison; Doug Gibson; Mehta Klock; Tanya Meyer; LeeAnne Mila; Scott Oneto; Steve Schoening; Marcos Trinidad
51	DOJ Tobacco Grant Program This enforcement grant will allow SFDPH to increase the Department's capacity for outreach and education; expand police decoy operations; eliminate illegal sales of tobacco; develop a protocol to investigate consumption; and to share data and knowledge.	105,932	a) San Francisco Unified School District Provide outreach to targeted populations	555 Franklin Street, San Francisco, CA 94102	Dr. Vincent Matthews, Superintendent	Superintendent Vincent Matthews, Ed.D.; Myong Leigh, Deputy Superintendent; Enikia Ford Morthel, Deputy Superintendent; Gentile Blythe, Deputy Superintendent; Jenny Lam, President; Kevin Boggess, Vice President; Matt Alexander, Commissioner; Ann Hus, Commissioner; Lainie Motamed, Commissioner; Mark Sanchez, Commissioner; Lisa Weissman-Ward, Commissioner
		8,964	b) San Francisco Public Health Foundation Fiscal Intermediary	1 Hallidie Plaza, Suite 808 San Francisco, CA 94102	Penny Eardley	Penny Eardley, Anastasiya Petrosova, Kelisa Tostelegese, Kitty Thornton, Laura Campos, Jehnifer Mikalacki-Subletti, Christy Cather, Nicole Falk, Ayanna Bennett, Elizabeth Longstreth, Courtney Lyles, Melissa Moore, Alice Villagomez, Adam Sharma, Mark Morewitz, Nick Oxford
		9,600	c) TBD - San Francisco community based organizations	TBD	TBD	TBD
54	Oral Health Program Prop 56 Provide activities that support oral health plan and build capacity for the facilitation and implementation of education, prevention, linkage to treatment, surveillance, and case management services.	5,000	a) APA Family Support Services Provide support for oral health program	10 Nottingham Place, San Francisco, CA 94133	Rick Yuen	Rose Chung; Cary Chen; Jacqueline Huie; Julie Howe; Joyce Tso; Mai-Sie Chan, M.D.; Kimberly Culp; Van Diep; Fanny Lam; Kory Lam; Jennifer Ng, M.D.; Susan Sung, Ph.D.; Dean Yao, Ph.D.; Rick Yuen; Sonya Trac; Su White
		5,000	b) CARECEN Provide support for oral health program	3101 Mission St Suite #101, San Francisco, CA 94110	Jose Artiga	Michelle Loya-Talamantes; Gabriella Rodenzo; Father Richard Smith, PhD; Jose Artiga; Elena Asturias, CFO; Kathleen Coll; Honorable Carmen Flores

			c) University of California, San Francisco Provide support for oral health program	550 16th Street, 7th Floor, San Francisco, CA 94143	Sam Hawgood	Philip Hammarskjöld, Chair; Andrew Ballard; Peter Briger; Todd Carter; Connie E. Chen; Fred Cohen; Phyllis Coulter; Dipanjan Deb; Dana Emery; William S. Fisher; Catherine Friedman; Sameer Gandhi; Kathryn Hall; Kenneth Hao; Julia Hartz; Carl Kawaja; Michael Kahn; Richard Kimball; Meyer Malka; Ian McKinnon; Diane Morris; Lisa Stone Pritzker; Steven Read; Ruchi Sanghvi; George Scangos; Shahar Soghikian; Joan Weil; Barbara Bass Bakar; Lynne Benhoff; William H. Davidow; Arthur H. Kern; George Marcus; Carmen Policy; Richard M. Rosenberg; Jacyln Saifer; Brook H. Byers; Kenneth T. Derr; Doris F. Fisher; Robert B. Friend; Ellen Magnin Newman; Founding Chair; William F. Oberdorfer; Diane B. Wilsey
		5,000	d) NICOS Chinese Health Coalition Provide support for oral health program	1208 Mason St, San Francisco, CA 94108	Kent Woo	Kent Woo; Michael Liao
		214,000	e) San Francisco Public Health Foundation Fiscal Intermediary	1 Hallidie Plaza, Suite 808 San Francisco, CA 94102	Penny Eardley	Penny Eardley, Anastasia Petrosova, Kelisa Tostelegese, Kitty Thornton, Laura Campos, Jehnifer Mikalacki-Sublett, Christy Cather, Nicole Falk, Ayanna Bennett, Elizabeth Longstreth, Courtney Lyles, Melissa Moore-Alice Villagomez, Adam Sharma, Mark Westwood, Nick Oxford
55	California Perinatal Equity Initiative Deepen understanding of the gaps in services within the Black community contributing to increased infant mortality rates and the promising interventions to reduce Black infant mortality	175,000	a) Heluna Health Providing program administration and support services - Fiscal Intermediary	13300 Crossroads Parkway, Suite 450, City of Industry, CA 91746	Blayne Cutler, MD, PhD	Blayne Cutler, MD, PhD, CEO; Tim Seifert, JD, CHRO; Peter Dale; Jordan Gadd, MA; Jo Kay Ghosh, PhD, CPO; Brian Gieseier, CFO; Elizabeth Power Robinson, MBA; Kiran Saluja; Robert R. Jenks, MBA; Tamara Joseph, JD; Alex Baker, MBA; Carladensia Edwards, PhD, Edward Yip, JD, Georgia Casciato, FACHE; Jean C. O'Connor, JD, MPH, DrPH, FACHE; Santos Veticacion, MD, PhD, MBA; Sarah Mullen Rich, MBA; Scott Frier, MPH, MBA; Susan De Santi, PhD; Von Nguyen, MD, MPH; Nicole J. Macaruch, JD; Vivian Vasallo; Celina Gorre; Bonnie Midura, MPH.
		85,000	b) TBD	TBD	TBD	TBD
56	CHVP State General Fund Innovation Implementing home visits as a primary intervention strategy for families from pregnancy through kindergarten to promote positive outcomes and family success.	400,000	a) Sonoma County co-recipient of grant funds	625 5th Street Santa Rosa, CA 95404	tdb	Susan Gorin; David Rabbit; Chris Coursey; James Gore; Lynda Hopkins
		200,000	b) Napa County co-recipient of grant funds .	2751 Napa Valley Corporate Drive Building B Napa, CA 94558	tdb	Brad Wagenknecht; Ryan Gregory; Diane Dillon; Alfredo Pedroza; Belia Ramos
58	Children & Youth with Special Health Care Needs -CYSHCN To support families of children with disabilities that will bring together the community agencies that serve children and youth with special health care needs in San Francisco independently of one another along with the families they are serving.	78,872	Support for Families of Children with Disabilities (SFCD)	1663 Mission Street, Suite 700, San Francisco, CA 94103	Jim Welsh	Maria Jose (Cote) Aul; Sally Levy Albert; Sally Coghlan McDonald; Jessica Berthold; Kathy Bello Shephard; Christine Binko; Tiffani Castillo-Lartigue; Nicholas Fram; Julia Griffiths; Rosena Harten; Amy Hollyfield; Jeffrey Leap; Tiffany Lin; Glynis Mason; Monique Nieto.
59	Crisis Care Mobile Units (CCMU) Program Department of Health Care Services	52,000	TBD provide MH program services	TBD	TBD	TBD
60	Behavioral Health Response and Rescue Project (BHRRP) for Community Mental Health Services Block Grant (MHBG) American Rescue Plan Act (ARPA)	107,140	a) University of California, San Francisco Fiscal Intermediary	550 16th Street, 7th Floor, San Francisco, CA 94143	Sam Hawgood	Philip Hammarskjöld, Chair; Andrew Ballard; Peter Briger; Todd Carter; Connie E. Chen; Fred Cohen; Phyllis Coulter; Dipanjan Deb; Dana Emery; William S. Fisher; Catherine Friedman; Sameer Gandhi; Kathryn Hall; Kenneth Hao; Julia Hartz; Carl Kawaja; Michael Kahn; Richard Kimball; Meyer Malka; Ian McKinnon; Diane Morris; Lisa Stone Pritzker; Steven Read; Ruchi Sanghvi; George Scangos; Shahar Soghikian; Joan Weil; Barbara Bass Bakar; Lynne Benhoff; William H. Davidow; Arthur H. Kern; George Marcus; Carmen Policy; Richard M. Rosenberg; Jacyln Saifer; Brook H. Byers; Kenneth T. Derr; Doris F. Fisher; Robert B. Friend; Ellen Magnin Newman; Founding Chair; William F. Oberdorfer; Diane B. Wilsey;
		155,359	b) Felton Institute Fiscal Intermediary	1500 Franklin Street, San Francisco, CA 94109	Al Gilbert	Adriana Furuzawa, MFTI, CPRP; Curtis Penn; Catherine Spensley, MSW, LCSW; Al Gilbert, President; Marvin Davis, CFOO; Liz Dalmacio-Julien, CPO; Dr. Robin Ortiz; Dr. Yohana Quiroz, COO; Darren Skolnick; Michael N. Hofman; Susan Bobutsky; Daniel Costello; Terry M. Limpert; Kathy Neal; Michael Orian; Peter Roio; Tamara Steele; Dr. Georgia Woods
61	Behavioral Health Response and Rescue Project (BHRRP) for Community Mental Health Services Block Grant (MHBG) Coronavirus Response and Relief Supplemental Appropriations Act (CRRSAA) Department of Health Care Services	486,611	a) University of California, San Francisco Fiscal Intermediary	550 16th Street, 7th Floor, San Francisco, CA 94143	Sam Hawgood	Philip Hammarskjöld, Chair; Andrew Ballard; Peter Briger; Todd Carter; Connie E. Chen; Fred Cohen; Phyllis Coulter; Dipanjan Deb; Dana Emery; William S. Fisher; Catherine Friedman; Sameer Gandhi; Kathryn Hall; Kenneth Hao; Julia Hartz; Carl Kawaja; Michael Kahn; Richard Kimball; Meyer Malka; Ian McKinnon; Diane Morris; Lisa Stone Pritzker; Steven Read; Ruchi Sanghvi; George Scangos; Shahar Soghikian; Joan Weil; Barbara Bass Bakar; Lynne Benhoff; William H. Davidow; Arthur H. Kern; George Marcus; Carmen Policy; Richard M. Rosenberg; Jacyln Saifer; Brook H. Byers; Kenneth T. Derr; Doris F. Fisher; Robert B. Friend; Ellen Magnin Newman; Founding Chair; William F. Oberdorfer; Diane B. Wilsey;
		344,787	b) Felton Institute Fiscal Intermediary	1500 Franklin Street, San Francisco, CA 94109	Al Gilbert	Adriana Furuzawa, MFTI, CPRP; Curtis Penn; Catherine Spensley, MSW, LCSW; Al Gilbert, President; Marvin Davis, CFOO; Liz Dalmacio-Julien, CPO; Dr. Robin Ortiz; Dr. Yohana Quiroz, COO; Darren Skolnick; Michael N. Hofman; Susan Bobutsky; Daniel Costello; Terry M. Limpert; Kathy Neal; Michael Orian; Peter Roio; Tamara Steele; Dr. Georgia Woods
		448,033	c) HealthRight 360 Fiscal Intermediary	1563 Mission St, SF, CA 94103	Dr. Vika Eisen	Vika Eisen; Tony Duong; Jagan Anandasakaran; Ana Valdis; Demetrius Andreas; Maribel Baez, MS-HA; Dylan Gattiraga; Evan Hesse; Britt Miazgowicz; Anna-Cristina Navarro; Alyssa Roy; Shabana Siegel ; April Torres; Denise Williams; Diane Ireland; Natalie Mitchell; Linda Smart; Daniel Binder; Yelen Balan; Natalie Beaulieu; Bryan Graham; Chris Gurley; Kathryn Holmes; Raquel Macfarlane; Talia Pierluzzi; Karen E. Pointer; Alex Pugh; Ahmad Thomas; Timothy Torres; Sankar Venkatraman
62	CRRSAA-SABG Provides children Strengthening Families Services, Community Outreach and education, and Campaign & Website development. Team Lily partnered with UCSF. Provide transitional housing for SUD.	220,925	a) HealthRight 360 Fiscal Intermediary	1563 Mission St, SF, CA 94103	Dr. Vika Eisen	Vika Eisen; Tony Duong; Jagan Anandasakaran; Ana Valdis; Demetrius Andreas; Maribel Baez, MS-HA; Dylan Gattiraga; Evan Hesse; Britt Miazgowicz; Anna-Cristina Navarro; Alyssa Roy; Shabana Siegel ; April Torres; Denise Williams; Diane Ireland; Natalie Mitchell; Linda Smart; Daniel Binder; Yelen Balan; Natalie Beaulieu; Bryan Graham; Chris Gurley; Kathryn Holmes; Raquel Macfarlane; Talia Pierluzzi; Karen E. Pointer; Alex Pugh; Ahmad Thomas; Timothy Torres; Sankar Venkatraman
		286,115	b) The Latino Commission provide MH/SUD program services	161 Margaret Avenue, San Francisco 94112	DEBRA CAMARILLO	Oiga Aldana; Dee Dee Rodriguez
		99,323	c) UCSF provide MH/SUD program services	1001 Potrero Avenue, San Francisco 94110	Sam Hawgood	Philip Hammarskjöld, Chair; Andrew Ballard; Peter Briger; Todd Carter; Connie E. Chen; Fred Cohen; Phyllis Coulter; Dipanjan Deb; Dana Emery; William S. Fisher; Catherine Friedman; Sameer Gandhi; Kathryn Hall; Kenneth Hao; Julia Hartz; Carl Kawaja; Michael Kahn; Richard Kimball; Meyer Malka; Ian McKinnon; Diane Morris; Lisa Stone Pritzker; Steven Read; Ruchi Sanghvi; George Scangos; Shahar Soghikian; Joan Weil; Barbara Bass Bakar; Lynne Benhoff; William H. Davidow; Arthur H. Kern; George Marcus; Carmen Policy; Richard M. Rosenberg; Jacyln Saifer; Brook H. Byers; Kenneth T. Derr; Doris F. Fisher; Robert B. Friend; Ellen Magnin Newman; Founding Chair; William F. Oberdorfer; Diane B. Wilsey
		82,549	d) Horizons Unlimited provide MH/SUD program services	440 Potrero Avenue, San Francisco 94110	Celina Lucero	Matthew Moretti, Virginia Tapia, Donna Amador, Cristina Corona, Zachary Johnson, Isabelle Plessis Boin, Salvador Serrano, Jillian Williams
		105,495	e) Jamestown Community Center provide MH/SUD program services	3382 26th St, San Francisco 94110	Nelly Sapinski	Betty Pazmino; Aleks Zavaleta; Rich Gross; Luis Barahona; Patricia Barraza; Efrain Barrera; Katie Brackenknee; Lisa Bransten; Gary Furney; Renu Karir; Paul Vega
		68,049	f) YMCA Urban Services provide MH/SUD program services	1426 Fillmore Street, Suite 204, San Francisco 94115	Jamie Bruning-Miles	Jamie Bruning-Miles, CEO; Mitte S. Orsby, CFO; Erin Clark, Vice President; Chip Rich, Vice President; Chad Nho Hiu, Vice President; Andy Varnis, Vice President; Jane Packer, Vice President; Rachel Del Monte, Vice President; Chris McCormick, Vice President; Takiya Gardner, Vice President; Marissa Cowan, Vice President; Andrew Ward; Anne Senores; Carrie Herrera; Evelyn Daskalakis; Grace J. Jhn; Karl Lee; Laura Hitchcock; Lauren Clapperton; Marsha Bell; Mick Hughes; Suzanne Medina; Tacing Parker; Theresa De Dios; Amy Price; Annabel Chang; Caryl B. Welborn; Christopher A. Patz; David Kelly; Eric Prosnitz; Gary Teague; Gina Gregory-Burns; Glenn M. Farrell; Gregory Evans; Heather Madison; Jason Angel; Jeff Briz; Jennifer Shoda; Jeremy Welland; John Baker; John G. Berg; John Willingham; Jon Eberly; Josue Estrada; Lisa Adujka; Marianna Pisano; Mark Bley; Michael Robinson; Michele Fichera; Mollie Richardson; Peter M. Susko; Phat Ly; Pratik Gadamassee; Richard Chisholm; Richard Robins; Samuel Li; Shane Seitz; Shelby Pascariel Test; Stephen Harkins; Stephen Rogers; Theodora Lee; Thomas Kearney; Brian Wheeler; Cecilia Thomas; Dr. Jason Lau; Geoffrey Gordon-Creed; Joseph Guaveara; Kathleen Bools; Katy
		60,049	g) Youth Leadership Institute provide MH/SUD program services	201 9th Street Suite 200, San Francisco 94103	Patricia Barahona	Kristin Belden, Thu Cung, Joshua Espulgar Rowe, Matthew Golding, Laura Harmon, Cameron Kurtz, Bill Leitoch, Philip Martin Gonzalez, Anna Pletcher, Ivoree Robinson, Elizabeth Romero, Nawz Talaj, James Wiley
		60,049	h) Japanese Community Youth Council provide MH/SUD program services	2012 Pine Street, San Francisco 94109	Jon Osaki	Angus MacDonald, Oliver Dunlap, Shah Nagree, Asia Harrigan, Breonna Santiago, Darryl Abantao, Dinesh C. Evan Wayne, Heather Littleton, Jerome Anderson, Johnny Kuo, Kitty Mah, Louise Carroll, Max Mah
		1,191,748	i) TBD provide MH/SUD program services	TBD	TBD	TBD
63	ARPA - SABG Provides children Strengthening Families Services, Community Outreach and education, and Campaign & Website development. To support a SORT program to provide treatment services for SUD clients	22,500	a) Horizons Unlimited provide MH/SUD program services	440 Potrero Avenue, San Francisco 94110	Celina Lucero	Matthew Moretti, Virginia Tapia, Donna Amador, Cristina Corona, Zachary Johnson, Isabelle Plessis Boin, Salvador Serrano, Jillian Williams
		14,603	b) Japanese Community Youth Council provide MH/SUD program services	2012 Pine Street, San Francisco 94109	Jon Osaki	Angus MacDonald, Oliver Dunlap, Shah Nagree, Asia Harrigan, Breonna Santiago, Darryl Abantao, Dinesh C. Evan Wayne, Heather Littleton, Jerome Anderson, Johnny Kuo, Kitty Mah, Louise Carroll, Max Mah
		321,802	c) UCSF provide MH/SUD program services	1001 Potrero Avenue, San Francisco 94110	Sam Hawgood	Philip Hammarskjöld, Chair; Andrew Ballard; Peter Briger; Todd Carter; Connie E. Chen; Fred Cohen; Phyllis Coulter; Dipanjan Deb; Dana Emery; William S. Fisher; Catherine Friedman; Sameer Gandhi; Kathryn Hall; Kenneth Hao; Julia Hartz; Carl Kawaja; Michael Kahn; Richard Kimball; Meyer Malka; Ian McKinnon; Diane Morris; Lisa Stone Pritzker; Steven Read; Ruchi Sanghvi; George Scangos; Shahar Soghikian; Joan Weil; Barbara Bass Bakar; Lynne Benhoff; William H. Davidow; Arthur H. Kern; George Marcus; Carmen Policy; Richard M. Rosenberg; Jacyln Saifer; Brook H. Byers; Kenneth T. Derr; Doris F. Fisher; Robert B. Friend; Ellen Magnin Newman; Founding Chair; William F. Oberdorfer; Diane B. Wilsey
		140,431	d) TBD provide MH/SUD program services	TBD	TBD	TBD

Total 14,302,294
Per State Recurring Grants List 14,302,294
Difference (0)

Subcontractor	Amount
18 Reasons Provide outreach to targeted populations	35,000
3rd Street Youth Center & Clinic	407,502
APA Family Support Services Provide support for oral health program	5,000
BH Commission	61,488
California Invasive Plant Council	36,000
CARECEN Provide support for oral health program	5,000
Catholic Charities - Leland House	174,783
Catholic Charities - Peter Claver	180,336
Children's Council of San Francisco	140,000
Curry Senior Center	114,273
Dolores Street Community Services	240,656
Facente Consulting	95,203
Family Services Agency	330,014
Felton Institute	131,080
Felton Institute	469,821
Felton Institute	20,000
Felton Institute	155,359
Felton Institute	344,787
Harm Reduction Therapy Center	18,480
Hatchuel Tabernik & Associates Inc	40,000
HealthRight 360	126,888
HealthRight 360	142,000
HealthRight 360	448,033
HealthRight 360	220,925
HealthRight 360	419,301
Heluna Health	499,118
Heluna Health	225,000
Heluna Health	175,000
Horizons Unlimited	22,500
Horizons Unlimited	82,549
Jamestown Community Center	105,495
Japanese Community Youth Council	14,603
Japanese Community Youth Council	60,049
Maitri AIDS Hospice	681,216
Napa County	200,000
NICOS Chinese Health Coalition	5,000
PRC	146,772
Project Open Hand	1,408,026
RAMS	249,691
RAMS	273,182
RAMS	5,000
RAMS	150,266
Richmond Area Multi-Services	247,302
San Francisco Public Health Foundation	19,228
San Francisco Public Health Foundation	181,818
San Francisco Public Health Foundation	14,885
San Francisco Public Health Foundation	135,354
San Francisco Public Health Foundation	14,161
San Francisco Public Health Foundation	8,964
San Francisco Public Health Foundation	214,000
San Francisco Public Health Foundation	1,419
San Francisco Study Center	13,732
San Francisco Unified School District	215,000
San Francisco Unified School District	105,932
Seneca	270,500
Shanti	95,203
Sonoma County	400,000
Support for Families of Children with Disabilities	78,872
TBD - per DPH no filing yet, subcontractors to be determined	85,000
TBD - per DPH no filing yet, subcontractors to be determined	40,700
TBD - per DPH no filing yet, subcontractors to be determined	52,000
TBD - per DPH no filing yet, subcontractors to be determined	1,191,748
TBD - per DPH no filing yet, subcontractors to be determined	140,431
TBD - per DPH no filing yet, subcontractors to be determined	9,600
The Latin Commission	286,115
UCSF Alliance Health Project	168,837
University of California, San Francisco	351,543
University of California, San Francisco	146,582
University of California, San Francisco	5,000
University of California, San Francisco	107,140
University of California, San Francisco	486,611

#REF!

University of California, San Francisco	99,323
University of California, San Francisco	321,802
YMCA Urban Services	68,049
Youth Leadership Institute	60,049



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:

File #: 220688

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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR 18 Reasons	TELEPHONE NUMBER (415) 568-2710
STREET ADDRESS (including City, State and Zip Code) 3674 18th Street, SF, CA 94110	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$35,000		
NATURE OF THE CONTRACT (Please describe) Provide outreach to targeted populations.		

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	Farrar-Rivas	Patricia	Board of Directors
2	Cogen	Shannon W.	Board of Directors
3	Rosner	Bob	Board of Directors
4	Hardisty	Aaron	Board of Directors
5	Baldauf	Marian Z.	Board of Directors
6	Buwembo	Issac	Board of Directors
7	Mogannam	Sam	Board of Directors
8	Nelson	Sarah	Board of Directors
9	Obst	Suzy	Board of Directors
10	Singh	Poonam	Board of Directors
11	Spicer	Maggie	Board of Directors
12	Tao	Rosabel	Board of Directors
13	Tsay	Calvin	Board of Directors
14	Wiggelsworth	Sarah	Board of Directors
15			
16			
17			
18			
19			

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
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9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
39			
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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.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
-------------------------------------------------------------------------------------------------------------------	---------------------------



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:

File #: 220688

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Notification of Contract Approval

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(S.F. Campaign and Governmental Conduct Code § 1.126(f)4)

A Public Document

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AMENDMENT DESCRIPTION – Explain reason for amendment	

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR 3rd Street Youth Center & Clinic	TELEPHONE NUMBER (415) 822-1707
STREET ADDRESS (including City, State and Zip Code) 1728 Bancroft Ave, San Francisco, CA 94124	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$407,502		
NATURE OF THE CONTRACT (Please describe) Fiscal Intermediary		

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	Magee	Michelle	Board of Directors
2	Lacoster	Lyslynn	Board of Directors
3	Relyea	Jackie	Board of Directors
4	Fallon	Laura	Board of Directors
5	Moorthy	Savitha	Board of Directors
6	Patton	Misty	Board of Directors
7	Lelaind	Herschel	Board of Directors
8	Kunene	Glen	Board of Directors
9	Eng	Vanessa	Board of Directors
10	Rodriguez	Jose A.	Board of Directors
11	Savage	Michael	Board of Directors
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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.

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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<input type="checkbox"/>	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.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
-------------------------------------------------------------------------------------------------------------------	---------------------------



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:

File #: 220688

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

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR APA Family Support Services	TELEPHONE NUMBER (415) 617-0061
STREET ADDRESS (including City, State and Zip Code) 10 Nottingham Place, San Francisco, CA 94133	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$5,000		
NATURE OF THE CONTRACT (Please describe) Provide support for oral health program		

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
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Chung	Rosa	Board of Directors
2	Chen	Cary	Board of Directors
3	Huie	Jacqueline	Board of Directors
4	Hoxie	Julie	Board of Directors
5	Tso	Joyce	Board of Directors
6	Chan	Mai-Sie	Board of Directors
7	Culp	Kimberly	Board of Directors
8	Diep	Van	Board of Directors
9	Lam	Fanny	Board of Directors
10	Lam	Kory	Board of Directors
11	Ng	Jennifer	Board of Directors
12	Sung	Susan	Board of Directors
13	Yao	Dean	Board of Directors
14	Yuen	Rick	Board of Directors
15	Trac	Sonya	Board of Directors
16	white	Shu	Board of Directors
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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR California Invasive Plant Council	TELEPHONE NUMBER (510) 843-3902
STREET ADDRESS (including City, State and Zip Code) 1442-A Walnut St. #462, Berkeley, CA 94709	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$36,000		
NATURE OF THE CONTRACT (Please describe) To restore specified marshes by replanting native cordgrass and marsh gumplant.		

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
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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	Kerr	Drew	Board of Directors
2	Matos	Juli	Board of Directors
3	Godfrey	Sarah	Board of Directors
4	Swanson	Amanda C.	Board of Directors
5	Giessow	Jason	Board of Directors
6	Addison	Steven	Board of Directors
7	Gibson	Doug	Board of Directors
8	Klock	Metha	Board of Directors
9	Meyer	Tanya	Board of Directors
10	Mila	LeeAnne	Board of Directors
11	Oneto	Scott	Board of Directors
12	Schoenig	Steve	Board of Directors
13	Trinidad	Marcos	Board of Directors
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9. AFFILIATES AND SUBCONTRACTORS

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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.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR CARECEN	TELEPHONE NUMBER (415) 642-4400
STREET ADDRESS (including City, State and Zip Code) 3101 Mission St Suite #101, San Francisco, CA 94110	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$5,000		
NATURE OF THE CONTRACT (Please describe) Provide support for oral health program.		

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

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Loya-Talamantes	Michelle	Board of Directors
2	Rodeno	Gabriella	Board of Directors
3	Smith	Richard	Board of Directors
4	Artiga	Jose	Board of Directors
5	Asturias	Elena	Board of Directors
6	Coll	Kathleen	Board of Directors
7	Flores	Carmen	Board of Directors
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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.

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I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
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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
Gregory Wong	415-554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Catholic Charities - Leland House	TELEPHONE NUMBER (415) 972-1200
STREET ADDRESS (including City, State and Zip Code) 1555 39th Ave, San Francisco, CA 94122	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$174,783		
NATURE OF THE CONTRACT (Please describe) To provide attendant care services in compliance with the Standard of Care for Client Centered Services to multiply diagnosed individuals at Leland House an RCF-CI program in San Francisco with a special focus on the unique needs of persons living with HIV/AIDS.		

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
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Cordileone	Salvatore J.	Board of Directors
2	Boerio	Joe	Board of Directors
3	Borromeo	Theodore	Board of Directors
4	Grogan	Kathleen A.	Board of Directors
5	Sundby	George B.	Board of Directors
6	Bojorquez	Diana I.	Board of Directors
7	Brigham	Martha	Board of Directors
8	Clark	Philip	Board of Directors
9	Dahik	Adriana	Board of Directors
10	O'Brien Frimel	Susie	Board of Directors
11	Gelt	Jerilyn	Board of Directors
12	Ghilotti	Michael M.	Board of Directors
13	Gonzalez	Eleanor	Board of Directors
14	Hultman	David R.	Board of Directors
15	Ikeda	Lisa	Board of Directors
16	Kearney	Philip	Board of Directors
17	Landis	Scott	Board of Directors
18	Leupp	Jay Paul	Board of Directors
19	McInerney	Maureen	Board of Directors

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
20	Mirek	Lori	Board of Directors
21	Nascimento	Dan	Board of Directors
22	Pohlman	Jack	Board of Directors
23	Reyes	Raymund	Board of Directors
24	Reynaud	Louis	Board of Directors
25	Sangiaco	Jim	Board of Directors
26	woody	Patrick	Board of Directors
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Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
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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
GREGORY WONG	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Catholic Charities Peter Claver Community	TELEPHONE NUMBER (415) 749-3800
STREET ADDRESS (including City, State and Zip Code) 1340 Golden Gate Ave, San Francisco, CA 94115	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$180,336		
NATURE OF THE CONTRACT (Please describe) To provide attendant care services in compliance with the Standard of Care for Client Centered Services to multiply diagnosed individuals at Peter Claver Community an RCFCI program in San Francisco with a special focus on the unique needs of persons living with HIV/AIDS.		

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	Cordileone	Salvatore J.	Board of Directors
2	Boerio	Joe	Board of Directors
3	Borromeo	Theodore	Board of Directors
4	Grogan	Kathleen A.	Board of Directors
5	Sundby	George B.	Board of Directors
6	Bojorquez	Diana I.	Board of Directors
7	Brigham	Martha	Board of Directors
8	Clark	Philip	Board of Directors
9	Dahik	Adriana	Board of Directors
10	O'Brien Frimel	Susie	Board of Directors
11	Gelt	Jerilyn	Board of Directors
12	Ghilotti	Michael M.	Board of Directors
13	Gonzalez	Eleanor	Board of Directors
14	Hultman	David R.	Board of Directors
15	Ikeda	Lisa	Board of Directors
16	Kearney	Philip	Board of Directors
17	Landis	Scott	Board of Directors
18	Leupp	Jay Paul	Board of Directors
19	McInerney	Maureen	Board of Directors

9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
20	Mirek	Lori	Board of Directors
21	Nascimento	Dan	Board of Directors
22	Pohlman	Jack	Board of Directors
23	Reyes	Raymund	Board of Directors
24	Reynaud	Louis	Board of Directors
25	Sangiaco	Jim	Board of Directors
26	woody	Patrick	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.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
-------------------------------------------------------------------------------------------------------------------	---------------------------



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:

File #: 220688

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

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Children's Council of San Francisco	TELEPHONE NUMBER (415) 276-2900
STREET ADDRESS (including City, State and Zip Code) 445 Church Street, San Francisco, CA 94114	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$140,000		
NATURE OF THE CONTRACT (Please describe) Provide outreach to targeted populations.		

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
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Nordberg	Anna	Board of Directors
2	Sims	Deborah	Board of Directors
3	Dusedau	Marga	Board of Directors
4	Vause	Brandy	Board of Directors
5	Murphy	Ashley	Board of Directors
6	Moore	Fatima	Board of Directors
7	Warehouse	Maegan	Board of Directors
8	Pattinson	Charmaine	Board of Directors
9	Israel	George	Board of Directors
10	Salaam	Na'eem	Board of Directors
11	Thomas	Chris	Board of Directors
12	Levinson	Jake	Board of Directors
13	Butler	Omar	Board of Directors
14	Benavidez	Dominique	Board of Directors
15	Hilberman	Jessica	Board of Directors
16	Rosberg	Peter	Board of Directors
17	Diana	Elizabeth	Board of Directors
18	Kirk	Jim	Board of Directors
19	Fram	Victoria	Board of Directors

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
20	Page	Farris	Board of Directors
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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Curry Senior Center	TELEPHONE NUMBER (415) 885-2274
STREET ADDRESS (including City, State and Zip Code) 333 Turk Street, San Francisco, CA 94102	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$114,273		
NATURE OF THE CONTRACT (Please describe) Provides support for older adults with mental health issues and are homeless or risk of losing their houses.		

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

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Davila	Jonrie	Board of Directors
2	Quituga	Shirely	Board of Directors
3	Sklar	Diane	Board of Directors
4	Bickham	David	Board of Directors
5	Slam	Arielle	Board of Directors
6	valente	Julie	Board of Directors
7	Norton	Alycia	Board of Directors
8	Pritchett	Pattie	Board of Directors
9	Dwyer	Diane	Board of Directors
10	Sullivan	Richard	Board of Directors
11	Lincecum	Hannah	Board of Directors
12	Selva	Sasha	Board of Directors
13	Huh	Ja Eun Guerrero	Board of Directors
14	Zachary	Wendy	Board of Directors
15	Illig	Jim	Board of Directors
16	wulfovich	Yael	Board of Directors
17	McKinnon	John	Board of Directors
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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.

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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

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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
GREGORY WONG	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Dolores Street Community Services	TELEPHONE NUMBER (415) 282-6209
STREET ADDRESS (including City, State and Zip Code) 938 Valencia St, San Francisco, CA 94110	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$240,656		
NATURE OF THE CONTRACT (Please describe) To improve and maintain the health of our residents through the provision of facility-based health care and other supportive services.		

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	Winn	Michael	Board of Directors
2	Avila	Rocio	Board of Directors
3	Lin	Kani	Board of Directors
4	Hernandez	Pedro	Board of Directors
5	Cameron	Anjali	Board of Directors
6	Penfold	Ward	Board of Directors
7	Leonard	Anat	Board of Directors
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9. AFFILIATES AND SUBCONTRACTORS

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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.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Facente Consulting	TELEPHONE NUMBER 415-999-1310
STREET ADDRESS (including City, State and Zip Code) 13300 Crossroads Parkway, Suite 450, CID CA 91746	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$95,203		
NATURE OF THE CONTRACT (Please describe) Professional consultation and technical Assistance for Strategic Planning.		

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
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Facente	Shelley	Board of Directors
2	Albers	Autumn	Board of Directors
3	Bland	William	Board of Directors
4	Burk	Katie	Board of Directors
5	Duran	Sara	Board of Directors
6	Geckeler	Dara	Board of Directors
7	Hynes	Meghan	Board of Directors
8	Paz-Gonzalez	Lazara	Board of Directors
9	Rhodes III	Perry	Board of Directors
10	Taylor	JT	Board of Directors
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9. AFFILIATES AND SUBCONTRACTORS

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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
Gregory Wong	415-554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Family Services Agency	TELEPHONE NUMBER (415) 474-7310
STREET ADDRESS (including City, State and Zip Code) 1500 Franklin Street, San Francisco, CA 94109	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$330,014		
NATURE OF THE CONTRACT (Please describe) Provides services First Episode Psychosis, families suffering from signs & symptoms of schizophrenia.		

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	Skolnick	Darren	Board of Directors
2	Hofman	Michael N.	Board of Directors
3	Bobulsky	Susan	Board of Directors
4	Costello	Daniel	Board of Directors
5	Limpert	Terry M.	Board of Directors
6	Neal	Kathy	Board of Directors
7	Orias	Michael	Board of Directors
8	Rojo	Peter	Board of Directors
9	Steele	Tamara	Board of Directors
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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.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
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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:

File #: 220688

Bid/RFP #:

Notification of Contract Approval

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(S.F. Campaign and Governmental Conduct Code § 1.126(f)4)

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Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
office of the clerk of the Board	Board.of.Supervisors@sfgov.org

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NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Felton Institute	TELEPHONE NUMBER (415) 474-7310
STREET ADDRESS (including City, State and Zip Code) 1500 Franklin Street, San Francisco, CA 94109	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$131,080		
NATURE OF THE CONTRACT (Please describe) Provide support for TAPP program.		

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
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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Felton Institute	TELEPHONE NUMBER (415) 474-7310
STREET ADDRESS (including City, State and Zip Code) 1500 Franklin Street, San Francisco, CA 94109	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$469,821		
NATURE OF THE CONTRACT (Please describe) Provide program support.		

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
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AMENDMENT DESCRIPTION – Explain reason for amendment	

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Felton Institute	TELEPHONE NUMBER (415) 474-7310
STREET ADDRESS (including City, State and Zip Code) 1500 Franklin Street, San Francisco, CA 94109	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$20,000		
NATURE OF THE CONTRACT (Please describe) Provides mental health technical assistance to community based MH crisis response to trauma.		

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
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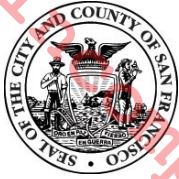
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FULL DEPARTMENT NAME	EMAIL
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DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Felton Institute	TELEPHONE NUMBER (415) 474-7310
STREET ADDRESS (including City, State and Zip Code) 1500 Franklin Street, San Francisco, CA 94109	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$155,359		
NATURE OF THE CONTRACT (Please describe) Fiscal Intermediary.		

7. COMMENTS

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
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I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
-------------------------------------------------------------------------------------------------------------------	---------------------------



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:

File #: 220688

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

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Felton Institute	TELEPHONE NUMBER (415) 474-7310
STREET ADDRESS (including City, State and Zip Code) 1500 Franklin Street, San Francisco, CA 94109	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$344,787		
NATURE OF THE CONTRACT (Please describe) Fiscal Intermediary.		

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	Furuzawa	Adriana	Board of Directors
2	Paschen	Kenji	Board of Directors
3	Penn	Curtis	Board of Directors
4	Spensley	Catherine	Board of Directors
5	Gilbert	Al	Board of Directors
6	Davis	Marvin	Board of Directors
7	Dalmacio-Julien	Liz	Board of Directors
8	Ortiz	Robin	Board of Directors
9	Quiroz	Yohana	Board of Directors
10	Skolnick	Darren	Board of Directors
11	Hofman	Michael N.	Board of Directors
12	Bobulsky	Susan	Board of Directors
13	Costello	Daniel	Board of Directors
14	Limpert	Terry M.	Board of Directors
15	Neal	Kathy	Board of Directors
16	Orias	Michael	Board of Directors
17	Rojo	Peter	Board of Directors
18	Steele	Tamara	Board of Directors
19	Woods	George	Board of Directors

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
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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<input type="checkbox"/>	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

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Original	
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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Harm Reduction Therapy Center	TELEPHONE NUMBER (415) 863-4282
STREET ADDRESS (including City, State and Zip Code) 45 Franklin Street San Francisco, CA 94102	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$18,480		
NATURE OF THE CONTRACT (Please describe) Provide Clinical Consultation Services to LINC frontline staff.		

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
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Weingand	Shantel	CFO
2	Dennison	Sam	Board of Directors
3	Del Pinal	Ale	Board of Directors
4	Jia Son	Alice	Board of Directors
5	Tidwell	Roy	Board of Directors
6	Denning	Patt	Board of Directors
7	Little	Jeannie	Board of Directors
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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Hatchuel Tabernik & Associates Inc	TELEPHONE NUMBER (510) 559-3193
STREET ADDRESS (including City, State and Zip Code) 2560 9th St., Suite 211, Berkeley, CA 94710	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$40,000		
NATURE OF THE CONTRACT (Please describe) Provide program evaluation services.		

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

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Tabernik	Tim	Board of Directors
2	Hatchuel	Dina	Board of Directors
3	Toussaint	Danielle	Board of Directors
4	Lobar	Russ	Board of Directors
5	Akin	Sarah D.	Board of Directors
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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
Gregory Wong	415-554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR HealthRight 360	TELEPHONE NUMBER 415-762-3700
STREET ADDRESS (including City, State and Zip Code) 1563 Mission St San Francisco CA 94103	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$126,888		
NATURE OF THE CONTRACT (Please describe) Provide fiscal intermediary check-writing services.		

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	Hawgood	Sam	Board of Directors
2	Velaski	Paul	Board of Directors
3	Trimble	Gardner	Board of Directors
4	Clune	Michael	Board of Directors
5	Calger	Joseph	Board of Directors
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR HealthRight 360	TELEPHONE NUMBER (415) 762-3700
STREET ADDRESS (including City, State and Zip Code) 1563 Mission St, SF, CA 94103	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$142,000		
NATURE OF THE CONTRACT (Please describe) Provides Fiscal Intermediary services.		

7. COMMENTS

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Eisen	Vitka	Board of Directors
2	Duong	Tony	Board of Directors
3	Anandasakaran	Jegan	Board of Directors
4	Valdes	Ana	Board of Directors
5	Andreas	Demetrius	Board of Directors
6	Baez	Maribel	Board of Directors
7	Gattridge	Dylan	Board of Directors
8	Hoese	Evan	Board of Directors
9	Miazgowicz	Britt	Board of Directors
10	Navarro	Anna C.	Board of Directors
11	Roy	Alyssa	Board of Directors
12	Siegel	Shabana	Board of Directors
13	Torres	April	Board of Directors
14	Williams	Denise	Board of Directors
15	Ireland	Diane	Board of Directors
16	Mitchell	Natalie	Board of Directors
17	Smart	Linda	Board of Directors
18	Binder	Daniel	Board of Directors
19	Balan	Yelen	Board of Directors

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
20	Beaulieu	Natalie	Board of Directors
21	Graham	Bryan	Board of Directors
22	Gurley	Chris	Board of Directors
23	Holmes	Kathryn	Board of Directors
24	Macfarlane	Raquel	Board of Directors
25	Pierluissi	Talia	Board of Directors
26	Pointer	Karen E.	Board of Directors
27	Pugh	Alex	Board of Directors
28	Thomas	Ahmad	Board of Directors
29	Torres	Timothy	Board of Directors
30	Venkatraman	Sankar	Board of Directors
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I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
-------------------------------------------------------------------------------------------------------------------	---------------------------



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:

File #: 220688

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

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR HealthRight 360	TELEPHONE NUMBER (415) 762-3700
STREET ADDRESS (including City, State and Zip Code) 1563 Mission St, SF, CA 94103	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$448,033		
NATURE OF THE CONTRACT (Please describe) Fiscal Intermediary.		

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	Eisen	Vitka	Board of Directors
2	Duong	Tony	Board of Directors
3	Anandasakaran	Jegan	Board of Directors
4	Valdes	Ana	Board of Directors
5	Andreas	Demetrius	Board of Directors
6	Baez	Maribel	Board of Directors
7	Gattridge	Dylan	Board of Directors
8	Hoese	Evan	Board of Directors
9	Miazgowicz	Britt	Board of Directors
10	Navarro	Anna C.	Board of Directors
11	Roy	Alyssa	Board of Directors
12	Siegel	Shabana	Board of Directors
13	Torres	April	Board of Directors
14	Williams	Denise	Board of Directors
15	Ireland	Diane	Board of Directors
16	Mitchell	Natalie	Board of Directors
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19	Balan	Yelen	Board of Directors

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23	Holmes	Kathryn	Board of Directors
24	Macfarlane	Raquel	Board of Directors
25	Pierluissi	Talia	Board of Directors
26	Pointer	Karen E.	Board of Directors
27	Pugh	Alex	Board of Directors
28	Thomas	Ahmad	Board of Directors
29	Torres	Timothy	Board of Directors
30	Venkatraman	Sankar	Board of Directors
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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR HealthRight 360	TELEPHONE NUMBER (415) 762-3700
STREET ADDRESS (including City, State and Zip Code) 1563 Mission St, SF, CA 94103	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$220,925		
NATURE OF THE CONTRACT (Please describe) Fiscal Intermediary.		

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

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Eisen	Vitka	Board of Directors
2	Duong	Tony	Board of Directors
3	Anandasakaran	Jegan	Board of Directors
4	Valdes	Ana	Board of Directors
5	Andreas	Demetrius	Board of Directors
6	Baez	Maribel	Board of Directors
7	Gattridge	Dylan	Board of Directors
8	Hoese	Evan	Board of Directors
9	Miazgowicz	Britt	Board of Directors
10	Navarro	Anna C.	Board of Directors
11	Roy	Alyssa	Board of Directors
12	Siegel	Shabana	Board of Directors
13	Torres	April	Board of Directors
14	Williams	Denise	Board of Directors
15	Ireland	Diane	Board of Directors
16	Mitchell	Natalie	Board of Directors
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18	Binder	Daniel	Board of Directors
19	Balan	Yelen	Board of Directors

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24	Macfarlane	Raquel	Board of Directors
25	Pierluissi	Talia	Board of Directors
26	Pointer	Karen E.	Board of Directors
27	Pugh	Alex	Board of Directors
28	Thomas	Ahmad	Board of Directors
29	Torres	Timothy	Board of Directors
30	Venkatraman	Sankar	Board of Directors
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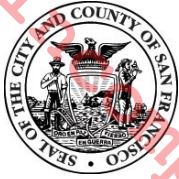
Check this box if you need to include additional names. Please submit a separate form with complete information. Select “Supplemental” for filing type.

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.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
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1. FILING INFORMATION

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR HealthRight 360	TELEPHONE NUMBER (415) 762-3700
STREET ADDRESS (including City, State and Zip Code) 1563 Mission St, SF, CA 94103	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$419,301		
NATURE OF THE CONTRACT (Please describe) Fiscal Intermediary		

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

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6	Baez	Maribel	Board of Directors
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8	Hoese	Evan	Board of Directors
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12	Siegel	Shabana	Board of Directors
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14	Williams	Denise	Board of Directors
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16	Mitchell	Natalie	Board of Directors
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19	Balan	Yelen	Board of Directors

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23	Holmes	Kathryn	Board of Directors
24	Macfarlane	Raquel	Board of Directors
25	Pierluissi	Talia	Board of Directors
26	Pointer	Karen E.	Board of Directors
27	Pugh	Alex	Board of Directors
28	Thomas	Ahmad	Board of Directors
29	Torres	Timothy	Board of Directors
30	Venkatraman	Sankar	Board of Directors
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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.

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1. FILING INFORMATION

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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
Gregory Wong	415-554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Heluna Health	TELEPHONE NUMBER 800-201-7320
STREET ADDRESS (including City, State and Zip Code) 13300 Crossroads Parkway, Suite 450, CID, CA 91746	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$499,118		
NATURE OF THE CONTRACT (Please describe) Provide support for Expecting Justice Program.		

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
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Cutler	Blayne	Board of Directors
2	Seifert	Tim	Board of Directors
3	Dale	Peter	Board of Directors
4	Gadd	Jordan	Board of Directors
5	Ghosh	Jo Kay	Board of Directors
6	Gieseler	Brian	Board of Directors
7	Robison	Elizabeth P.	Board of Directors
8	Saluja	Kiran	Board of Directors
9	Jenks	Robert R.	Board of Directors
10	Joseph	Tamara	Board of Directors
11	Baker	Alex	Board of Directors
12	Edwards	Carladenise	Board of Directors
13	Yip	Edward	Board of Directors
14	Casciato	Georgia	Board of Directors
15	O'Connor	Jean	Board of Directors
16	Vetticaden	Santosh	Board of Directors
17	Rich	Sarah M.	Board of Directors
18	Filer	Scott	Board of Directors
19	De Santi	Susan	Board of Directors

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
20	Nguyen	Von	Board of Directors
21	Macarchuk	Nicole J.	Board of Directors
22	Vasallo	Vivian	Board of Directors
23	Gorre	Celina	Board of Directors
24	Midura	Bonnie	Board of Directors
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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Heluna Health	TELEPHONE NUMBER (800) 201-7320
STREET ADDRESS (including City, State and Zip Code) 13300 Crossroads Parkway, Suite 450, CID CA 91746	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$225,000		
NATURE OF THE CONTRACT (Please describe) Providing program administration and support services - Fiscal Intermediary.		

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
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2	Seifert	Tim	Board of Directors
3	Dale	Peter	Board of Directors
4	Gadd	Jordan	Board of Directors
5	Ghosh	Jo Kay	Board of Directors
6	Gieseler	Brian	Board of Directors
7	Robinson	Elizabeth Power	Board of Directors
8	Saluja	Kiran	Board of Directors
9	Jenks	Robert R.	Board of Directors
10	Joseph	Tamara	Board of Directors
11	Baker	Alex	Board of Directors
12	Edwards	Carladenise	Board of Directors
13	Yip	Edward	Board of Directors
14	Casciato	Georgia	Board of Directors
15	O'Connor	Jean	Board of Directors
16	Vetticaden	Santosh	Board of Directors
17	Rich	Sarah M.	Board of Directors
18	Filer	Scott	Board of Directors
19	De Santi	Susan	Board of Directors

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
20	Nguyen	Von	Board of Directors
21	Macarchuk	Nicole J.	Board of Directors
22	Vasallo	Vivian	Board of Directors
23	Gorre	Celina	Board of Directors
24	Midura	Bonnie	Board of Directors
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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	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.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
-------------------------------------------------------------------------------------------------------------------	---------------------------



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:

File #: 220688

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

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Heluna Health	TELEPHONE NUMBER (800) 201-7320
STREET ADDRESS (including City, State and Zip Code) 13300 Crossroads Parkway, Suite 450, CID, CA 91746	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$175,000		
NATURE OF THE CONTRACT (Please describe) Providing program administration and support services - Fiscal Intermediary.		

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	Cutler	Blayne	Board of Directors
2	Seifert	Tim	Board of Directors
3	Dale	Peter	Board of Directors
4	Gadd	Jordan	Board of Directors
5	Ghosh	Jo Kay	Board of Directors
6	Gieseler	Brian	Board of Directors
7	Robison	Elizabeth P.	Board of Directors
8	Saluja	Kiran	Board of Directors
9	Jenks	Robert R.	Board of Directors
10	Joseph	Tamara	Board of Directors
11	Baker	Alex	Board of Directors
12	Edwards	Carladenise	Board of Directors
13	Yip	Edward	Board of Directors
14	Casciato	Georgia	Board of Directors
15	O'Connor	Jean	Board of Directors
16	Vetticaden	Santosh	Board of Directors
17	Rich	Sarah M.	Board of Directors
18	Filer	Scott	Board of Directors
19	De Santi	Susan	Board of Directors

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
20	Nguyen	Von	Board of Directors
21	Macarchuk	Nicole J.	Board of Directors
22	Vasallo	Vivian	Board of Directors
23	Gorre	Celina	Board of Directors
24	Midura	Bonnie	Board of Directors
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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Horizons Unlimited	TELEPHONE NUMBER (415) 487-6700
STREET ADDRESS (including City, State and Zip Code) 440 Potrero Avenue, San Francisco 94110	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$22,500		
NATURE OF THE CONTRACT (Please describe) provide MH/SUD program services.		

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	Moretti	Matthew	Board of Directors
2	Tapia	Virginia	Board of Directors
3	Amador	Donna	Board of Directors
4	Corona	Cristina	Board of Directors
5	Johnson	Zachary	Board of Directors
6	Boin	Isabelle P.	Board of Directors
7	Serrano	Salvador	Board of Directors
8	Williams	Jillian	Board of Directors
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9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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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	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.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
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Bid/RFP #:

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1. FILING INFORMATION

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Horizons Unlimited	TELEPHONE NUMBER (415) 487-6700
STREET ADDRESS (including City, State and Zip Code) 440 Potrero Avenue, San Francisco 94110	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$82,549		
NATURE OF THE CONTRACT (Please describe) provide MH/SUD program services.		

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	Moretti	Matthew	Board of Directors
2	Tapia	Virginia	Board of Directors
3	Amador	Donna	Board of Directors
4	Corona	Cristina	Board of Directors
5	Johnson	Zachary	Board of Directors
6	Boin	Isabelle P.	Board of Directors
7	Serrano	Salvador	Board of Directors
8	Williams	Jillian	Board of Directors
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9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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<input type="checkbox"/>	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

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I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
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1. FILING INFORMATION

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Original	
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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Jamestown Community Center	TELEPHONE NUMBER (415) 647-4709
STREET ADDRESS (including City, State and Zip Code) 3382 26th St, San Francisco 94110	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$105,495		
NATURE OF THE CONTRACT (Please describe) provide MH/SUD program services.		

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	Pazmino	Betty	Board of Directors
2	Zavaleta	Aleks	Board of Directors
3	Gross	Rich	Board of Directors
4	Barahona	Luis	Board of Directors
5	Barraza	Patricia	Board of Directors
6	Barrera	Efrain	Board of Directors
7	Brackenridge	Katie	Board of Directors
8	Bransten	Lisa	Board of Directors
9	Furney	Gary	Board of Directors
10	Karir	Renu	Board of Directors
11	Vega	Paul	Board of Directors
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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.

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Japanese Community Youth Council	TELEPHONE NUMBER (415) 563-8052
STREET ADDRESS (including City, State and Zip Code) 2012 Pine Street, San Francisco 94109	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$14,603		
NATURE OF THE CONTRACT (Please describe) provide MH/SUD program services.		

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

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	MacDonald	Angus	Board of Directors
2	Dunlap	Oliver	Board of Directors
3	Nagree	Shah	Board of Directors
4	Harrigan	Asia	Board of Directors
5	Santiago	Breonna	Board of Directors
6	Abantao	Darryl	Board of Directors
7	C	Dinesh	Board of Directors
8	Wayne	Evan	Board of Directors
9	Littleton	Heather	Board of Directors
10	Anderson	Jerome	Board of Directors
11	Kuo	Johnny	Board of Directors
12	Mah	Kitty	Board of Directors
13	Carroll	Louise	Board of Directors
14	Mah	Max	Board of Directors
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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	TYPE
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<input type="checkbox"/>	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.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
-------------------------------------------------------------------------------------------------------------------	---------------------------



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:

File #: 220688

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

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR NICOS Chinese Health Coalition	TELEPHONE NUMBER (415) 788-6426
STREET ADDRESS (including City, State and Zip Code) 1208 Mason St, San Francisco, CA 94108	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$5,000		
NATURE OF THE CONTRACT (Please describe) Provide support for oral health program.		

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

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Woo	Kent	Board of Directors
2	Liao	Michael	Board of Directors
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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.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
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1. FILING INFORMATION

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Project Open Hand	TELEPHONE NUMBER (415) 447-2300
STREET ADDRESS (including City, State and Zip Code) 730 Polk St, San Francisco, CA 94109	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$1,408,026		
NATURE OF THE CONTRACT (Please describe) To improve the nutritional health of all people living with HIV/AIDS through prepared meals, groceries, nutrition assessments and other food and nutrition services.		

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

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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	Henry	Mike	Board of Directors
2	Yankoupe	Ruth	Board of Directors
3	Colton	John	Board of Directors
4	wakankar	Aditya	Board of Directors
5	Chandra	Vishwa	Board of Directors
6	Petraglia	Jennifer	Board of Directors
7	Chang	Andrew	Board of Directors
8	Maring	Preston	Board of Directors
9	McSwine	Ginny	Board of Directors
10	Ng Chang	Theresa	Board of Directors
11	wilkinson	Andrea	Board of Directors
12	York	Helene	Board of Directors
13	Drimmer-Rokovich	Jennifer	Board of Directors
14	Long	Richard	Board of Directors
15	Wood	Arthur	Board of Directors
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<input type="checkbox"/>	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.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
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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
GREGORY WONG	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR San Francisco Public Health Foundation	TELEPHONE NUMBER (415) 504-6738
STREET ADDRESS (including City, State and Zip Code) 1 Hallidie Plz, Ste 808, San Francisco, CA 94102	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$1,419		
NATURE OF THE CONTRACT (Please describe) Fiscal intermediary		

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	Eardley	Penny	Board of Directors
2	Petrosova	Anastasija	Board of Directors
3	Toatelegese	Kellsa	Board of Directors
4	Thornton	Kitty	Board of Directors
5	Campos	Laura	Board of Directors
6	Mikalacki-Sublett	Jehniifer	Board of Directors
7	Cather	Christy	Board of Directors
8	Falk	Nicole	Board of Directors
9	Bennett	Ayanna	Board of Directors
10	Longstreth	Elizabeth	Board of Directors
11	Lyles	Courtney	Board of Directors
12	Moore	Melissa	Board of Directors
13	Villagomez	Alice	Board of Directors
14	Sharma	Adam	Board of Directors
15	Morewitz	Mark	Board of Directors
16	Oxford	Nick	Board of Directors
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<input type="checkbox"/>	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

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<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR UCSF Alliance Health Project	TELEPHONE NUMBER (415) 476-3902
STREET ADDRESS (including City, State and Zip Code) 1930 Market St, San Francisco, CA 94102	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$168,837		
NATURE OF THE CONTRACT (Please describe) The program goal is to provide outpatient mental health services to people living with HIV - including Long-Term Survivors - to reduce symptoms and functional impairments resulting from mental health and/or substance use disorders.		

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
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Dilley	James W.	Board of Directors
2	Thoemmes	Lori	Board of Directors
3	Flentje	Annesa	Board of Directors
4	Garcia	Braulio	Board of Directors
5	Haas	DK	Board of Directors
6	Matos	Ramon	Board of Directors
7	Murphy	Jessica	Board of Directors
8	Rhodes	Perry	Board of Directors
9	Shockey	Jen	Board of Directors
10	wong	Holly	Board of Directors
11	Shumate	Kate	Board of Directors
12	Breall	Susan M.	Board of Directors
13	Hare	Brad	Board of Directors
14	Hillmon	Reginald	Board of Directors
15	Liu	Enchi	Board of Directors
16	Mettler	Berenice	Board of Directors
17	Pearce	Ken	Other Principal Officer
18	Toh	Sophia	Board of Directors
19			

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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.

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Behavioral Health Commission	TELEPHONE NUMBER (415) 554-5184
STREET ADDRESS (including City, State and Zip Code) 1380 Howard Street, San Francisco, CA 94103	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$61,488		
NATURE OF THE CONTRACT (Please describe) Support Administrative oversight of system-of-care fiscal intermediary funding in order to maintain level of finding for training.		

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
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Jackson-Lane	Carletta	Board of Directors
2	Slota	Richelle L.	Board of Directors
3	Vigil	Bahlam	Board of Directors
4	Banuelos	Stephen	Board of Directors
5	Drummond	Judy Z.	Board of Directors
6	Klain	Judith	Board of Directors
7	Parks	Toni	Board of Directors
8	Stevens	Harriett S.	Board of Directors
9	Thakore-Dunlap	Ulash	Board of Directors
10	Idell	Wilson	Board of Directors
11	Bohrer	Terezie	Board of Directors
12	Ashe1	Sempel	Board of Directors
13	Safai	Ahsha	Board of Directors
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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	TYPE
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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
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<input type="checkbox"/>	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.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
-------------------------------------------------------------------------------------------------------------------	---------------------------



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:

File #: 220688

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

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Japanese Community Youth Council	TELEPHONE NUMBER (415) 563-8052
STREET ADDRESS (including City, State and Zip Code) 2012 Pine Street, San Francisco 94109	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$60,049		
NATURE OF THE CONTRACT (Please describe) Provide MH/SUD program services.		

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	McDonald	Angus	Board of Directors
2	Dunlap	Oliver	Board of Directors
3	Nagree	Shah	Board of Directors
4	Harrigan	Asia	Board of Directors
5	Santiago	Breonna	Board of Directors
6	Abantao	Darryl	Board of Directors
7	C	Dinesh	Board of Directors
8	Wayne	Evan	Board of Directors
9	Littleton	Heather	Board of Directors
10	Anderson	Jerome	Board of Directors
11	Kuo	Johnny	Board of Directors
12	Mah	Kitty	Board of Directors
13	Carroll	Louise	Board of Directors
14	Mah	Max	Board of Directors
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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.

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Maitri AIDS Hospice	TELEPHONE NUMBER (415) 558-3000
STREET ADDRESS (including City, State and Zip Code) 401 Duboce Ave, San Francisco, CA 94117	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$681,216		
NATURE OF THE CONTRACT (Please describe) To provide safe housing, medical care and nutrition supports for those with HIV at end of life and those needing respite to return to independence as defined by the resident.		

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	Lapointe	Ray	Board of Directors
2	Wong	Jane	Board of Directors
3	Miller	Austin	Board of Directors
4	Cummings	Gregg	Board of Directors
5	King	Jim	Board of Directors
6	Casados	Johannes	Board of Directors
7	Mishra	Bismay	Board of Directors
8	Cummings	Donna	Board of Directors
9	Dilawri	Namita	Board of Directors
10	Rana	Sameera	Board of Directors
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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.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Napa County	TELEPHONE NUMBER 707-253-4540
STREET ADDRESS (including City, State and Zip Code) 2751 Napa Valley Corporate Drive Bldg B Napa, CA 94558	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$200,000		
NATURE OF THE CONTRACT (Please describe) Co-recipient of grant funds.		

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	wagenknecht	Brad	Board of Directors
2	Gregory	Ryan	Board of Directors
3	Dillon	Diane	Board of Directors
4	Pedroza	Alfredo	Board of Directors
5	Ramos	Belia	Board of Directors
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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.

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR PRC	TELEPHONE NUMBER 415-777-0333
STREET ADDRESS (including City, State and Zip Code) 170 9th Street, San Francisco, CA 94103	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$146,772		
NATURE OF THE CONTRACT (Please describe) Providing Equal Access to Health Care Program Services		

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	Schneider	Brian	Board of Directors
2	Roger	Kent M.	Board of Directors
3	Schroder	Tim	Board of Directors
4	Brown	Chris	Board of Directors
5	Callaghan	Larkin	Board of Directors
6	Freiman	Josh	Board of Directors
7	Gonzalez	Nelson	Board of Directors
8	Ishida	Ryo	Board of Directors
9	Michaels	Jacques	Board of Directors
10	Niczyporuk	Michael	Board of Directors
11	Papilion	Zack	Board of Directors
12	Smith	Darren	Board of Directors
13	Steinberg	Michael	Board of Directors
14	Treaster	Merredith	Board of Directors
15	Andrews	Brett	CEO
16	Alouf	Joe	CFO
17	Clark	Elaine	CFO
18	Fostel	John	Other Principal Officer
19	Henneman	Tasha	Other Principal Officer

9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
20	Teng	Chuan	Other Principal Officer
21	Paul	Randi	Other Principal Officer
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR RAMS	TELEPHONE NUMBER (415) 668-5955
STREET ADDRESS (including City, State and Zip Code) 3626 Balboa St, SF, CA 94124	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$249,691		
NATURE OF THE CONTRACT (Please describe) Provides Peer Internship Program that prepares clients for employment in peer support and counseling		

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

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Muhammad	Jayvon	Board of Directors
2	Giovannini	Domenica	Board of Directors
3	Shea	Christina	Board of Directors
4	Tang	Angela	Board of Directors
5	Agajanian	Eduard	Board of Directors
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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.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
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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:

File #: 220688

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

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1. FILING INFORMATION

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR RAMS	TELEPHONE NUMBER (415) 668-5955
STREET ADDRESS (including City, State and Zip Code) 3626 Balboa St, SF, CA 94124	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$273,182		
NATURE OF THE CONTRACT (Please describe) Provides Bilingual-designated counselor positions.		

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

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Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR RAMS	TELEPHONE NUMBER (415) 668-5955
STREET ADDRESS (including City, State and Zip Code) 3626 Balboa St, SF, CA 94124	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$5,000		
NATURE OF THE CONTRACT (Please describe) Peer wages for consumers participating in running a coffee service at the OMI Mental Health Clinic - Job training wages.		

7. COMMENTS

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR RAMS	TELEPHONE NUMBER (415) 668-5955
STREET ADDRESS (including City, State and Zip Code) 3626 Balboa St, SF, CA 94124	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$150,266		
NATURE OF THE CONTRACT (Please describe) Provides support of consumer-run centers serving many dually-diagnosed individuals		

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
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3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
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office of the clerk of the Board	Board.of.Supervisors@sfgov.org

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Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Richmond Area Multi-Services	TELEPHONE NUMBER (415) 800-0699
STREET ADDRESS (including City, State and Zip Code) 3626 Balboa St, SF, CA 94124	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$247,302		
NATURE OF THE CONTRACT (Please describe) Provide Peer Internship Program that prepares clients for employment in peer support and counseling positions.		

7. COMMENTS

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
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office of the clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR San Francisco Public Health Foundation	TELEPHONE NUMBER (415) 504-6738
STREET ADDRESS (including City, State and Zip Code) 1 Hallidie Plz, Ste 808, San Francisco, CA 94102	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$19,228		
NATURE OF THE CONTRACT (Please describe) Fiscal Intermediary		

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

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2	Petrosova	Anastasija	Board of Directors
3	Toatelegese	Kellsa	Board of Directors
4	Thornton	Kitty	Board of Directors
5	Campos	Laura	Board of Directors
6	Mikalacki- sublett	Jennifer	Board of Directors
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11	Lyles	Courtney	Board of Directors
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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.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
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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:

File #: 220688

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

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1. FILING INFORMATION

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR San Francisco Public Health Foundation	TELEPHONE NUMBER (415) 504-6738
STREET ADDRESS (including City, State and Zip Code) 1 Hallidie Plz, Ste 808, San Francisco, CA 94102	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$181,818		
NATURE OF THE CONTRACT (Please describe) Fiscal Intermediary svc for California TB Controller's Association.		

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
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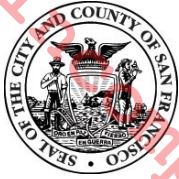
Check this box if you need to include additional names. Please submit a separate form with complete information. Select “Supplemental” for filing type.

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR San Francisco Public Health Foundation	TELEPHONE NUMBER (415) 504-6738
STREET ADDRESS (including City, State and Zip Code) 1 Hallidie Plz, Ste 808, San Francisco, CA 94102	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$14,885		
NATURE OF THE CONTRACT (Please describe) Fiscal intermediary		

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
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<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
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File #: 220688

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1. FILING INFORMATION

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR San Francisco Public Health Foundation	TELEPHONE NUMBER (415) 504-6738
STREET ADDRESS (including City, State and Zip Code) 1 Hallidie Plz, Ste 808, San Francisco, CA 94102	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$135,354		
NATURE OF THE CONTRACT (Please describe) Providing program administration in support of SF Tobacco Free Project.		

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
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OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
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3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
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FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
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NAME OF CONTRACTOR San Francisco Public Health Foundation	TELEPHONE NUMBER (415) 504-6738
STREET ADDRESS (including City, State and Zip Code) 1 Hallidie Plz, Ste 808, San Francisco, CA 94102	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$14,161		
NATURE OF THE CONTRACT (Please describe) Fiscal intermediary.		

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
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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR San Francisco Public Health Foundation	TELEPHONE NUMBER (415) 504-6738
STREET ADDRESS (including City, State and Zip Code) 1 Hallidie Plaza, Suite 808 San Francisco, CA 94102	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$8,964		
NATURE OF THE CONTRACT (Please describe) Fiscal Intermediary.		

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	Eardley	Penny	Board of Directors
2	Petrosova	Anastasija	Board of Directors
3	Toatelegese	Kellsa	Board of Directors
4	Thornton	Kitty	Board of Directors
5	Campos	Laura	Board of Directors
6	Mikalacki- sublett	Jehniifer	Board of Directors
7	Cather	Christy	Board of Directors
8	Falk	Nicole	Board of Directors
9	Bennent	Ayanna	Board of Directors
10	Longstreth	Elizabeth	Board of Directors
11	Lyles	Courtney	Board of Directors
12	Moore	Melissa	Board of Directors
13	Villagomez	Alice	Board of Directors
14	Sharma	Adam	Board of Directors
15	Morewitz	Mark	Board of Directors
16	Oxford	Nick	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.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
-------------------------------------------------------------------------------------------------------------------	---------------------------



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:

File #: 220688

Bid/RFP #:

Notification of Contract Approval

SFEC Form 126(f)4

(S.F. Campaign and Governmental Conduct Code § 1.126(f)4)

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR San Francisco Public Health Foundation	TELEPHONE NUMBER (415) 504-6738
STREET ADDRESS (including City, State and Zip Code) 1 Hallidie Plz, Ste 808, San Francisco, CA 94102	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$214,000		
NATURE OF THE CONTRACT (Please describe) Fiscal Intermediary.		

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
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8	Falk	Nicole	Board of Directors
9	Bennett	Ayanna	Board of Directors
10	Longstreth	Elizabeth	Board of Directors
11	Lyles	Courtney	Board of Directors
12	Moore	Melissa	Board of Directors
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14	Sharma	Adam	Board of Directors
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I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR San Francisco Study Center	TELEPHONE NUMBER (415) 626-1650
STREET ADDRESS (including City, State and Zip Code) 1663 Mission Street, Suite 310, San Francisco, CA 94103	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$13,732		
NATURE OF THE CONTRACT (Please describe) Peer wages for consumers participating in running a coffee service at the OMI Mental Health Clinic.		

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
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Livingston	Richard	Board of Directors
2	Yee	Tina Tong	Board of Directors
3	True	Reiko H.	Board of Directors
4	Elbga1	Hazim	Board of Directors
5	Eldon	Eric	Board of Directors
6	Kutnick	Benjamin A.	Board of Directors
7	Kwong	Jeanne	Board of Directors
8	Margaronis	Stas	Board of Directors
9	McWilliams	Jim	Board of Directors
10	Link	Geoffrey	Board of Directors
11	Chen	Jaden	Board of Directors
12	Nunez	John	Board of Directors
13	Vera	Leonor	Board of Directors
14	Kuo	Linda	Board of Directors
15	Soriano	Irene	Board of Directors
16	Beggs	Marjorie	Board of Directors
17	Stampfli	Lise	Board of Directors
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR San Francisco Unified School District	TELEPHONE NUMBER (415) 241-6085
STREET ADDRESS (including City, State and Zip Code) 555 Franklin Street, San Francisco, CA 94102	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$215,000		
NATURE OF THE CONTRACT (Please describe) Provide outreach to targeted populations.		

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
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Matthews	Vincent	Board of Directors
2	Leigh	Myong	Board of Directors
3	Morthel	Enikia F.	Board of Directors
4	Blythe	Gentle	Board of Directors
5	Lam	Jenny	Board of Directors
6	Bogges	Kevin	Board of Directors
7	Alexander	Matt	Board of Directors
8	Hsu	Ann	Board of Directors
9	Motamedi	Lainie	Board of Directors
10	Sanchez	Mark	Board of Directors
11	Weissman-Ward	Lisa	Board of Directors
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NAME OF FILER'S CONTACT	TELEPHONE NUMBER
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FULL DEPARTMENT NAME	EMAIL
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NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR San Francisco Unified School District	TELEPHONE NUMBER (415) 241-6000
STREET ADDRESS (including City, State and Zip Code) 555 Franklin Street, San Francisco, CA 94102	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$105,932		
NATURE OF THE CONTRACT (Please describe) Provide outreach to targeted populations.		

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
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7	Alexander	Matt	Board of Directors
8	Hsu	Ann	Board of Directors
9	Motamedi	Lainie	Board of Directors
10	Sanchez	Mark	Board of Directors
11	Weissman-Ward	Lisa	Board of Directors
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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Seneca Family of Agencies	TELEPHONE NUMBER 510-654-4004
STREET ADDRESS (including City, State and Zip Code) 8945 Golf Links Rd, Oakland, CA 94605	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$270,500		
NATURE OF THE CONTRACT (Please describe) Fiscal Intermediary.		

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	Gilbert	Neil	Board of Directors
2	Galyean	Leticia	Board of Directors
3	Aroner	Dion	Board of Directors
4	Le Plastrier	Geoffrey	Board of Directors
5	Benning	Rochelle	Board of Directors
6	Davi	Jeff	Board of Directors
7	Foster	Gwen	Board of Directors
8	Pizzini	Sylvia	Board of Directors
9	Pena	Nancy	Board of Directors
10	Church	Jamie	Board of Directors
11	Citron	Jason	Board of Directors
12	Cohen	Zach	Board of Directors
13	Hill	Zach	Board of Directors
14	Ke	Venus	Board of Directors
15	Mortensen	Anders	Board of Directors
16	Redmon	Dwayne	Board of Directors
17	Thatch	Hong	Board of Directors
18	Gaywood	Stephanie	Board of Directors
19			

9. AFFILIATES AND SUBCONTRACTORS

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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.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
-------------------------------------------------------------------------------------------------------------------	---------------------------



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:

File #: 220688

Bid/RFP #:

Notification of Contract Approval

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Shanti	TELEPHONE NUMBER (415) 674-4700
STREET ADDRESS (including City, State and Zip Code) 730 Polk Street, 3rd Floor San Francisco, CA 94109	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$95,203		
NATURE OF THE CONTRACT (Please describe) Provides Hepatitis C prevention services.		

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

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Dawes	William L.	Board of Directors
2	Ennis	Jamie	Board of Directors
3	Francone	Jerry	Board of Directors
4	Kiernan	Sheila F.	Board of Directors
5	Klearman	Micki	Board of Directors
6	Sell	John	Board of Directors
7	Sullivan	Ethan M.	Board of Directors
8	Supanich	Chip	Board of Directors
9	Weinstein	Marc	Board of Directors
10	Weinstein	Josh	Board of Directors
11	Yee	Stanley	Board of Directors
12	Roy	Kaushik	Board of Directors
13	Meade	Charlie	Board of Directors
14	Schnedar	Patricia J.	Board of Directors
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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.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Sonoma County	TELEPHONE NUMBER (707) 565-2241
STREET ADDRESS (including City, State and Zip Code) 625 5th Street Santa Rosa, CA 95404	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$400,000		
NATURE OF THE CONTRACT (Please describe) Co-recipient of grant funds		

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	Gorin	Susan	Board of Directors
2	Rabbitt	David	Board of Directors
3	Coursey	Chris	Board of Directors
4	Gore	James	Board of Directors
5	Hopkins	Lynda	Board of Directors
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I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
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1. FILING INFORMATION

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Support for Families of Children with Disabilities	TELEPHONE NUMBER (415) 282-7494
STREET ADDRESS (including City, State and Zip Code) 1663 Mission Street, Suite 700, San Francisco, CA 9410	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$78,872		
NATURE OF THE CONTRACT (Please describe) Fiscal Intermediary		

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

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Auil	Maria J.	Board of Directors
2	Albert	Sarah L.	Board of Directors
3	McDonald	Sally C.	Board of Directors
4	Berthold	Jessica	Board of Directors
5	Shepherd	Kathy B.	Board of Directors
6	Binko	Christine	Board of Directors
7	Castillo-Lartigue	Tiffani	Board of Directors
8	Fram	Nicholas	Board of Directors
9	Griffiths	Julia	Board of Directors
10	Harten	Rosena	Board of Directors
11	Hollyfield	Amy	Board of Directors
12	Leap	Jeffrey	Board of Directors
13	Lin	Tiffany	Board of Directors
14	Mason	Glynis	Board of Directors
15	Nieto	Monique	Board of Directors
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<input type="checkbox"/>	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

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I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR The Latino Commission	TELEPHONE NUMBER 650-244-1444
STREET ADDRESS (including City, State and Zip Code) 161 Margaret Avenue, San Francisco 94112	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$286,115		
NATURE OF THE CONTRACT (Please describe) Provide MH/SUD program services.		

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

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Aldana	Olga	Board of Directors
2	Rodriguez	Dee D.	Board of Directors
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I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
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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
Gregory Wong	415-554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR University of California, San Francisco	TELEPHONE NUMBER 415-476-1000
STREET ADDRESS (including City, State and Zip Code) 550 16th Street, 7th Floor, San Francisco CA 94143	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$351,543		
NATURE OF THE CONTRACT (Please describe) Conduct a new comprehensive client assessment and produce a modified Treatment Plan.		

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.

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6	Cohen	Fred	Board of Directors
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<input type="checkbox"/>	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.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
-------------------------------------------------------------------------------------------------------------------	---------------------------



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:

File #: 220688

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

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Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

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NAME OF CONTRACTOR University of California, San Francisco	TELEPHONE NUMBER (415) 476-1000
STREET ADDRESS (including City, State and Zip Code) 550 16th Street, 7th Floor, San Francisco, CA 94143	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$146,582		
NATURE OF THE CONTRACT (Please describe) Technical Assistance: HIV Global Health.		

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
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19	Meyer	Malika	Board of Directors

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SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



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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

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NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR University of California, San Francisco	TELEPHONE NUMBER (415) 476-1000
STREET ADDRESS (including City, State and Zip Code) 550 16th Street, 7th Floor, San Francisco, CA 94143	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$5,000		
NATURE OF THE CONTRACT (Please describe) Provide support for oral health program.		

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

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Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
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FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
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NAME OF CONTRACTOR University of California, San Francisco	TELEPHONE NUMBER (415) 476-1000
STREET ADDRESS (including City, State and Zip Code) 550 16th Street, 7th Floor, San Francisco, CA 94143	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$107,140		
NATURE OF THE CONTRACT (Please describe) Fiscal Intermediary.		

7. COMMENTS

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
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DESCRIPTION OF AMOUNT OF CONTRACT \$486,611		
NATURE OF THE CONTRACT (Please describe) Fiscal Intermediary.		

7. COMMENTS

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Hammarskjold	Philip	Board of Directors
2	Ballard	Andrew	Board of Directors
3	Briger	Peter	Board of Directors
4	Carter	Todd	Board of Directors
5	Chen	Connie E.	Board of Directors
6	Cohen	Fred	Board of Directors
7	Coulter	Phyllis	Board of Directors
8	Deb	Dipanjan	Board of Directors
9	Emery	Dana	Board of Directors
10	Fisher	William S.	Board of Directors
11	Friedman	Catherine	Board of Directors
12	Gandhi	Sameer	Board of Directors
13	Hall	Kathryn	Board of Directors
14	Hao	Kenneth	Board of Directors
15	Hartz	Julia	Board of Directors
16	Kawaja	Carl	Board of Directors
17	Kahn	Michael	Board of Directors
18	Kimball	Richard	Board of Directors
19	Malka	Meyer	Board of Directors

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
20	McKinnon	Ian	Board of Directors
21	Morris	Diane	Board of Directors
22	Pritzker	Lisa S.	Board of Directors
23	Read	Steven	Board of Directors
24	Sanghvi	Ruchi	Board of Directors
25	Scangos	George	Board of Directors
26	Soghikian	Shahan	Board of Directors
27	Weill	Joan	Board of Directors
28	Vajar	Barbara B.	Board of Directors
29	Benioff	Lynne	Board of Directors
30	Davidow	William H.	Board of Directors
31	Kern	Arthur H.	Board of Directors
32	Marcus	George	Board of Directors
33	Policy	Carmen	Board of Directors
34	Rosenberg	Richard M.	Board of Directors
35	Safier	Jaclyn	Board of Directors
36	Byers	Brook H.	Board of Directors
37	Derr	Kenneth T.	Board of Directors
38	Fisher	Doris F.	Board of Directors

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
39	Friend	Robert B.	Board of Directors
40	Newman	Ellen M.	Board of Directors
41	Oberndorf	William E.	Board of Directors
42	wilsey	Diane B.	Board of Directors
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<input type="checkbox"/>	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.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
-------------------------------------------------------------------------------------------------------------------	---------------------------



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:

File #: 220688

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

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR University of California, San Francisco	TELEPHONE NUMBER (415) 476-1000
STREET ADDRESS (including City, State and Zip Code) 1001 Potrero Avenue, San Francisco 94110	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$99,323		
NATURE OF THE CONTRACT (Please describe) provide MH/SUD program services.		

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
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4	Carter	Todd	Board of Directors
5	Chen	Connie E.	Board of Directors
6	Cohen	Fred	Board of Directors
7	Coulter	Phyllis	Board of Directors
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11	Friedman	Catherine	Board of Directors
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14	Hao	Kenneth	Board of Directors
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25	Scangos	George	Board of Directors
26	Soghikian	Shahan	Board of Directors
27	Weill	Joan	Board of Directors
28	Bakar	Barbara B.	Board of Directors
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30	Davidow	William H.	Board of Directors
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32	Marcus	George	Board of Directors
33	Policy	Carmen	Board of Directors
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40	Newman	Ellen M.	Board of Directors
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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.

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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR University of California, San Francisco	TELEPHONE NUMBER (415) 476-1000
STREET ADDRESS (including City, State and Zip Code) 1001 Potrero Avenue, San Francisco 94110	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$321,802		
NATURE OF THE CONTRACT (Please describe) Provide MH/SUD program services.		

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

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2	Ballard	Andrew	Board of Directors
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9	Emery	Dana	Board of Directors
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26	Soghikian	Shahan	Board of Directors
27	Weill	Joan	Board of Directors
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29	Benioff	Lynne	Board of Directors
30	Davidow	William H.	Board of Directors
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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
Gregory Wong	(415) 554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Youth Leadership Institute	TELEPHONE NUMBER (628) 400-9252
STREET ADDRESS (including City, State and Zip Code) 201 9th Street Suite 200, San Francisco 94103	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$60,049		
NATURE OF THE CONTRACT (Please describe) Provide MH/SUD program services.		

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

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Belden	Kristin	Board of Directors
2	Cung	Thu	Board of Directors
3	Rowe	Joshua E.	Board of Directors
4	Goulding	Matthew	Board of Directors
5	Harmon	Laura	Board of Directors
6	Kurtz	Cameron	Board of Directors
7	Leitsch	Bill	Board of Directors
8	Gonzalez	Phillip M.	Board of Directors
9	Pletcher	Anna	Board of Directors
10	Robinson	Ivoree	Board of Directors
11	Romero	Elizabeth	Board of Directors
12	Talai	Nawz	Board of Directors
13	Wiley	James	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

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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
Gregory Wong	415-554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR YMCA Urban Services	TELEPHONE NUMBER (415) 561-0631
STREET ADDRESS (including City, State and Zip Code) 1426 Fillmore Street, Suite 204, San Francisco CA 94115	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220688
DESCRIPTION OF AMOUNT OF CONTRACT \$68,049		
NATURE OF THE CONTRACT (Please describe) provide MH/SUD program services.		

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
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Susko	Peter M.	Board of Directors
2	Ly	Phat	Board of Directors
3	Gadamasetti	Pratik	Board of Directors
4	Chisholm	Richard	Board of Directors
5	Robins	Richard	Board of Directors
6	Li	Samuel	Board of Directors
7	Seitz	Shane	Board of Directors
8	Tsai	Shelby P.	Board of Directors
9	Hankins	Stephen	Board of Directors
10	Rogers	Stephen	Board of Directors
11	Lee	Theodora	Board of Directors
12	Kearney	Thomas	Board of Directors
13	wheeler	Brian	Board of Directors
14	Thomas	Cecilia	Board of Directors
15	Lau	Jason	Board of Directors
16	Gordon-Creed	Geoffrey	Board of Directors
17	Guevara	Joseph	Board of Directors
18	Bolts	Kathleen	Board of Directors
19	Birnbaum	Katy	Board of Directors

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
20	Shea	Keith	Board of Directors
21	walker	La Shon	Board of Directors
22	Bargman	Matt	Board of Directors
23	Brown	Myesha	Board of Directors
24	Mapps	Roscoe	Board of Directors
25	Ramler	Sarah	Board of Directors
26	Pham	Young	Board of Directors
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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.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
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DEPT	Item	Description	Type of Legislation	File #
ADM	Critical Repair/Recovery Stimulus COPs	Authorizes COPs to finance or refinance the capital plan in the budget.	Ordinance	
ADM	Entertainment Commission Fee Changes	Fee decrease for fixed speakers due to the Commission's "Just Add Music" initiative.	Ordinance	
ADM	Reproduction and Notary Fee Changes	Fee increase for a variety of printing and scanning services at the Permit Center.	Ordinance	
ADM	Prop J Continuation	Moscone Convention Center.	Resolution	
ADM	Prop J Continuation	Fleet security services.	Resolution	
ADM	Prop J Continuation	Real estate security services.	Resolution	
ADM	Prop J Continuation	Real estate custodial services.	Resolution	
BOS	Prop J Continuation	Budget Legislative Analyst (BLA).	Resolution	
CAT	Courthouse Construction Fund	The Board adopted an ordinance last year terminating the Fund, which was established in 1992, because the courthouse construction project is complete and fully financed. This ordinance completes the process.	Ordinance	
CON	Access Line Tax	Sets Access Line Tax. Revenues assumed in budget.	Resolution	
CON	Neighborhood Beautification Fund	Neighborhood Beautification Fund contribution levels assumed in budget.	Ordinance	
DEM	EMSA Fee Changes	Changing the fee structure for EMSA fees that are charged to hospitals.	Ordinance	
DPH	Recurring State Grants	Accept and expend for annual, recurring state grant funds.	Resolution	
DPH	Patient Rates	Amending the Health Code to set patient rates and rates for other services provided by the Department of Public Health.	Ordinance	
DPH	Prop J Continuation	Clinic security services.	Resolution	
DPW	Prop J Continuation	Security services.	Resolution	
FIR	Organizational Changes in the City's Administrative Code	Changing the City's Administrative Code to transition the Chief of EMS position up a Deputy Chief position.	Ordinance	
HRC	State Grant Acceptance	Acceptance of the state-funded California for All grant for the Opportunities for All program.	Resolution	
HSA	Prop J Continuation	Security services.	Resolution	
HSH	CAAP Legislation	Annual legislation for CAAP housing with funding from HSA.	Resolution	
HSH	Prop J Continuation	Security services.	Resolution	
MYR	Prop J Continuation	Security services.	Resolution	

POL	Police Vehicle Theft Crime Fund Surcharge	Increasing the car registration surcharge. Funds will be used to deter, investigate, or prosecute vehicle theft crimes.	Ordinance	
REC	Marina Dredging Surcharge	Imposing a surcharge to license fees at Marina West Harbor to pay for necessary dredging at the Harbor.	Ordinance	
REC	Francisco Park Conservancy Grant Agreement	Credits the Francisco Park Conservancy to offset unanticipated project cost increases incurred due to PG&E requirements.	Resolution	
REG	Prop J Continuation	Assembly of vote by mail envelope services.	Resolution	
SHF	Prop J Continuation	Food services at county jails.	Resolution	
TIS	Prop J Continuation	Mainframe system support.	Resolution	



TO: Angela Calvillo, Clerk of the Board of Supervisors
FROM: Tom Paulino
RE: Accept and Expend Grants - Recurring State Grant Funds - Department of
Public Health - FY2022-2023
DATE: June 1, 2022

Resolution authorizing the acceptance and expenditure of State grant funds by the San Francisco Department of Public Health for FY2022-2023.

Should you have any questions, please contact Tom Paulino at 415-554-6153.