



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 #: 220458

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
Arata Goto	(415) 701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing and Comm. Dev	arata.goto@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR ASIAN, Inc.	TELEPHONE NUMBER 415-928-5910
STREET ADDRESS (including City, State and Zip Code) 1167 Mission Street, 4th floor San Francisco, CA 94103	EMAIL info@asianinc.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220458
DESCRIPTION OF AMOUNT OF CONTRACT 38869		
NATURE OF THE CONTRACT (Please describe) CDBG funds for Technical assistance for multilingual small businesses and microenterprises Project ID: OEWD2		

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	Fung	Frank	Board of Directors
2	Lo	Robert	Board of Directors
3	Ciu	Christina	Board of Directors
4	Lem	Betty	Board of Directors
5	Bryan	Aubri	Board of Directors
6	Chau	Andrew	Board of Directors
7	Leong	Jonathan	Board of Directors
8	Royse	Roger	Board of Directors
9	Heystek	Lamar	CEO
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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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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
Arata Goto	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing and Comm. Dev	CommDevRFP@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Bay Area Community Resources	TELEPHONE NUMBER 415-444-5580
STREET ADDRESS (including City, State and Zip Code) 171 Carlos Drive, San Rafael, CA 94903	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$100,000		
NATURE OF THE CONTRACT (Please describe) CDBG funds for Portola San Bruno Avenue commercial corridor revitalization Project ID - 167516-21/OEWD3		

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	Breckenridge	Bryan	Board of Directors
2	Vaughan	Monica	Board of Directors
3	McEvers Anderson	Nancy	Board of Directors
4	Travers	Bud	Board of Directors
5	Ness	Rob	Board of Directors
6	Davisson	Robert	Board of Directors
7	wu	Sinclair	Board of Directors
8	Omolade	Moses	Board of Directors
9	weinstein	Martin	CEO
10	Campbell	Cathleen	CFO
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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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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
Arata Goto	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing & Comm. Dev.	commdevRFP@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Bayview Hunters Point Multipurpose Senior Services	TELEPHONE NUMBER 415-822-1444
STREET ADDRESS (including City, State and Zip Code) 1753 Carroll Avenue, 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) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$102,000		
NATURE OF THE CONTRACT (Please describe) CDBG Funds for Project ID - 160068-21 HOPE SF Housing Retention and Case Management		

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	Hall	Marvin	Board of Directors
2	Churchwell	Cesar	Board of Directors
3	Richardson	Linda	Board of Directors
4	Hastings	Sammy	Board of Directors
5	Henderson	Paul	Board of Directors
6	Tugbenyoh	Mawuli	Board of Directors
7	Elias-Jackson	Jo	Board of Directors
8	Osby-Bell	Jeanne	Board of Directors
9	James	Oscar	Board of Directors
10	Davis	Cathy	CEO
11	Huang	Wes	CFO
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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
Arata Goto	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing & Comm. Dev.	CommDevRFP@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Young Men's Christian Association of San Francisco	TELEPHONE NUMBER 415-822-7728
STREET ADDRESS (including City, State and Zip Code) 50 California Street, San Francisco, CA 94111	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$100,000		
NATURE OF THE CONTRACT (Please describe) CDBG Funds for Project ID - OEWD4/163931-21 Young Adult Job Center		

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	Bruning-Miles	Jamie	CEO
2	Grigsby	Mittie S.	CFO
3	Parker	Tacing	Other Principal Officer
4	Price	Amy	Board of Directors
5	Chang	Annabel	Board of Directors
6	welborn	Caryl	Board of Directors
7	Patz	Christopher	Board of Directors
8	kelly	David	Board of Directors
9	Prosnitz	Eric	Board of Directors
10	Teague	Gary	Board of Directors
11	Gregory-Burns	Gina	Board of Directors
12	Farrell	Glenn	Board of Directors
13	Evans	Gregory	Board of Directors
14	Madison	Heather	Board of Directors
15	Angel	Jason	Board of Directors
16	Briz	Jeff	Board of Directors
17	Shoda	Jennifer	Board of Directors
18	welland	Jeremy	Board of Directors
19	Baker	John	Board of Directors

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
20	Berg	John	Board of Directors
21	Willingham	John	Board of Directors
22	Eberly	Jon	Board of Directors
23	Estrada	Josue	Board of Directors
24	Adukia	Kisa	Board of Directors
25	Pisano	Marianna	Board of Directors
26	Bley	Mark	Board of Directors
27	Robinson	Michael	Board of Directors
28	Fichera	Michele	Board of Directors
29	Richardson	Mollie	Board of Directors
30	Susko	Peter	Board of Directors
31	Ly	Phat	Board of Directors
32	Gadamasettii	Pratik	Board of Directors
33	Chisholm	Richard	Board of Directors
34	Robins	Richard	Board of Directors
35	Li	Samuel	Board of Directors
36	Seitz	Shane	Board of Directors
37	Pasarell Tsai	Shelby	Board of Directors
38	Hankins	Stephen	Board of Directors

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
39	Rogers	Stephen	Board of Directors
40	Lee	Theodora	Board of Directors
41	Kearney	Thomas	Board of Directors
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Arata Goto	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing & Comm. Dev.	CommDevRFP@Sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Causa Justa :: Just Cause	TELEPHONE NUMBER 510-763-5877
STREET ADDRESS (including City, State and Zip Code) PO Box 7737, Oakland, CA 94601	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$558,450		
NATURE OF THE CONTRACT (Please describe) CDBG funds for Citywide and Mission District Eviction Prevention through Tenant Counseling and Education (Project ID- 160079-21)		

7. COMMENTS

8. CONTRACT APPROVAL	
This contract was approved by:	
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1	Foy	Michelle	Board of Directors
2	Guillen	Maria Elena	Board of Directors
3	Gold	Adam	Board of Directors
4	Guzman	Laura	Board of Directors
5	Quint	Maisha	Board of Directors
6	Aubry	Ja'Nai	Board of Directors
7	Redden	Shaketa	CEO
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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 #: 220458

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
Arata Goto	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing & Comm. Dev.	CommDevRFP@Sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Central City Hospitality House	TELEPHONE NUMBER 415-749-2100
STREET ADDRESS (including City, State and Zip Code) 290 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) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$335,000		
NATURE OF THE CONTRACT (Please describe) CDBG Funds for Neighborhood Access Point (Project ID - OEWD5)		

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	wilson	Joe	Board of Directors
2	Raider	Mara	CFO
3	Bunker	Jeanie	Board of Directors
4	Hampton	Michael	Board of Directors
5	Cerutti	Braden	Board of Directors
6	Rocchio	Maria	Board of Directors
7	Johnson	Jesse James	Board of Directors
8	Boden	Paul	Board of Directors
9	Go	Elaine	Board of Directors
10	Isaac Quinn	Dana	Board of Directors
11	Ongpin	Olivia	Board of Directors
12	Lew	Sam	Board of Directors
13	Asega	Yoni	Board of Directors
14	Cutler	Kelley	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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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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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
Arata Goto	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing & Comm. Dev.	commdevrfp@sfgov.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) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$55,000		
NATURE OF THE CONTRACT (Please describe) CDBG Funds for 9-week Homebased Childcare Entrepreneurship Training for Spanish Speakers (Project ID - OEWD6/167517-21)		

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	Fromer	Gina	CEO
2	Sims	Deborah	Board of Directors
3	Dusedau	Marga	Board of Directors
4	Butler	Omar	Board of Directors
5	Diana	Elisabeth	Board of Directors
6	Fram	Victoria	Board of Directors
7	Hilberman	Jessica	Board of Directors
8	Isreal	George	Board of Directors
9	Kirk	Jim	Board of Directors
10	Moore	Fatima	Board of Directors
11	Farris	Page	Board of Directors
12	Rosberg	Peter	Board of Directors
13	Thomas	Chris	Board of Directors
14	Vause	Brandy	Board of Directors
15	Murphy	Ashley	Board of Directors
16	Salaam	Na'eem	Board of Directors
17	Pattison	Charmaine	Board of Directors
18	Levinson	Charmaine	Board of Directors
19	Benavidez	Dominique	Board of Directors

9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
20	Warehouse	Maegan	Board of Directors
21	Fischer	Eric	CFO
22	Nordberg	Anna	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	
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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
Arata Goto	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing & Comm. Dev.	commdevrfp@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Chinatown Community Development Center, Inc.	TELEPHONE NUMBER (415) 984-1450
STREET ADDRESS (including City, State and Zip Code) 1525 Grant Avenue 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) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$148,750		
NATURE OF THE CONTRACT (Please describe) CDGB Funds for Service Connection to Residents of SRO Hotels (Project ID - 160086-21)		

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	Yeung	Malcolm	CEO
2	Louie	Cindy	CFO
3	Chin	Jane	Board of Directors
4	Zoubi	Fady	Board of Directors
5	Brookter	Dion-Jay	Board of Directors
6	Cordero	Terence	Board of Directors
7	Fagler	Jim	Board of Directors
8	Quock	Lindsey	Board of Directors
9	Nguyen	James	Board of Directors
10	Cheng	Claudine	Board of Directors
11	Craig	Cathy	Board of Directors
12	Hilton	Irene	Board of Directors
13	Hollins	Guy	Board of Directors
14	Lee	Olson	Board of Directors
15	Lin	Barbara	Board of Directors
16	Poe	Irma	Board of Directors
17	Ruiz	Sam	Board of Directors
18	Wong	Susie	Board of Directors
19	Leadbetter	Julie	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	Lim	Aaron	Board of Directors
21	Lin	wendell	Board of Directors
22	Rosenquest	Nils	Board of Directors
23	Tse	Nigel	Board of Directors
24	Zhang	Mary	Board of Directors
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9. AFFILIATES AND SUBCONTRACTORS

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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	
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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
Arata Goto	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing & Comm. Dev.	commdevrfp@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Chinese for Affirmative Action	TELEPHONE NUMBER 415.274.6750
STREET ADDRESS (including City, State and Zip Code) 17 Walter U. Lum Place 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) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$100,000		
NATURE OF THE CONTRACT (Please describe) CDBG funds for Specialized Job Center (Project ID - OEWD7)		

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	Fong	John	CFO
2	Choi	Cynthia	CEO
3	Pan	Vincent	CEO
4	Zhu	Tracy	Board of Directors
5	Chang	Eric	Board of Directors
6	Guo	Michael	Board of Directors
7	Lowe	Randall	Board of Directors
8	Zheng	Eddy	Board of Directors
9	wong	Germaine	Board of Directors
10	Lee	Olivia	Board of Directors
11	wang	Anna	Board of Directors
12	Yip	Randall	Board of Directors
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9. AFFILIATES AND SUBCONTRACTORS

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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
Arata Goto	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing & Comm. Dev.	commdevrfp@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Collective Impact	TELEPHONE NUMBER 4155670400
STREET ADDRESS (including City, State and Zip Code) PO Box 156853, 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) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$100,000		
NATURE OF THE CONTRACT (Please describe) CDBG Funds for Young Adult Job Center to provide individualized employment services and career/educational exploration to young adults (Project ID - OEWD8)		

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	Spingola	James	CEO
2	DeVreker	Renaud	CFO
3	Shah	Puneed	Board of Directors
4	Weitzman	Lauren	Board of Directors
5	Stuart	Jessie	Board of Directors
6	Carole	Nadine Rose	Board of Directors
7	Jonas	Emily	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 #: 220458

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
Arata Goto	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing & Comm. Dev.	CommDevRFP@Sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Episcopal Community Services of San Francisco	TELEPHONE NUMBER (415) 487-3300
STREET ADDRESS (including City, State and Zip Code) 165 8th 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) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$64,000		
NATURE OF THE CONTRACT (Please describe) CDBG Grant for Skill building, primarily for homeless residents of District 6 (Project ID - 160113-21)		

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	Stokes	Beth	CEO
2	Callandrillo	Chris	COO
3	Larra	Eric	CFO
4	Handley Andrus	Marc	Board of Directors
5	Bond	Doug	Board of Directors
6	Clayter	Todd	Board of Directors
7	Dienst	Sedgwick	Board of Directors
8	Geeslin	Keith	Board of Directors
9	Hartley	Kate	Board of Directors
10	Jones	Martin	Board of Directors
11	Ketcham	Susan	Board of Directors
12	McTiernan	Megan	Board of Directors
13	Mouton-Patterson	Rita	Board of Directors
14	Rodriquez	Jonathan	Board of Directors
15	Shah	Tajel	Board of Directors
16	Silveira	Dara	Board of Directors
17	Singer	Susanna	Board of Directors
18	Springwater	Richard	Board of Directors
19	Ho	Heidi	Board of Directors

9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
20	Tatsuno	Yvonne	Board of Directors
21	Zaidi	S. Hassan	Board of Directors
22			
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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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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
Arata Goto	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing & Comm. Dev.	CommDevRFP@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Eviction Defense Collaborative, Inc.	TELEPHONE NUMBER 415.947.0797
STREET ADDRESS (including City, State and Zip Code) 1338 Mission St., 4th Floor 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) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$638,184		
NATURE OF THE CONTRACT (Please describe) CDBG Grant for Tenant Right to Counsel partners providing full-scope legal representation for residents facing eviction (Project ID - 160114-21)		

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	Pokand	Matthew	Board of Directors
2	Lopez	Priscilla	Board of Directors
3	Zadmehran	Sacha	Board of Directors
4	Alioto	Josephine	Board of Directors
5	Carrillo Rodriguez	Lila	Board of Directors
6	Lyon	Shelly	Board of Directors
7	Polanco-Mendoza	Dina	Board of Directors
8	weber	John	Board of Directors
9	wright	Greg	Board of Directors
10	Cucullu Lim	Martina	CEO
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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.

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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
Arata Goto	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing & Comm. Dev.	CommDevRFP@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Excelsior Action Group	TELEPHONE NUMBER (415) 769-5115
STREET ADDRESS (including City, State and Zip Code) 35 San Juan Ave, San Francisco, CA 94112	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$100,000		
NATURE OF THE CONTRACT (Please describe) CBDG Grant for Excelsior commercial corridor revitalization (Project ID - OEWD9)		

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	Ramirez	Maribel	CEO
2	Mulkey-Meyer	Cathy	Board of Directors
3	Harris	Al	Board of Directors
4	Colville	Bruce	Board of Directors
5	Cajina	Fulvio	Board of Directors
6	Harris	Mary	Board of Directors
7	Navarro	Rubie	Board of Directors
8	Zvanski	Claire	Board of Directors
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10. VERIFICATION

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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
Arata Goto	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing & Comm. Dev.	CommDevRFP@Sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Good Samaritan Family Resource Center of San Francisco	TELEPHONE NUMBER (415) 401-4253
STREET ADDRESS (including City, State and Zip Code) 1294 Potrero Ave, 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) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$52,000		
NATURE OF THE CONTRACT (Please describe) CDBG grant for ESL training, primarily for Latinx immigrant residents of the Mission (Project ID - 160126-21)		

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	Paz	Mario	CEO
2	Arias	Ximena	Board of Directors
3	Ausman	Bao-Tran	Board of Directors
4	Beja	Jacquie	Board of Directors
5	Bryant	Joseph	Board of Directors
6	Cornwell	Robert	Board of Directors
7	DeRosa	Frank	Board of Directors
8	Drego	Vidya	Board of Directors
9	Fisher	Bruce	Board of Directors
10	Hernandez	Bob	Board of Directors
11	Kaplan	David	Board of Directors
12	Levinson	Alan	Board of Directors
13	Lopez	Vangie	Board of Directors
14	Slutu	Virginia	Board of Directors
15	Susser	Rebecca	Board of Directors
16	Taylor	Kat	Board of Directors
17	Thornley	Douglas	Board of Directors
18	Vargas	Mary	Board of Directors
19	Vivianco	Sandra	Board of Directors

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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
20	Yu	Charmaine	Board of Directors
21	Marquez-Magana	Leticia	Board of Directors
22	wishom	Eric	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
Arata Goto	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing & Comm. Dev.	CommDevRFP@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Gum Moon Residence Hall	TELEPHONE NUMBER (415) 421-8827
STREET ADDRESS (including City, State and Zip Code) 940 Washington 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) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$23,405		
NATURE OF THE CONTRACT (Please describe) CDBG grant for Employment training for primarily API survivors of domestic violence, sexual assault and human trafficking (Project ID - 160128-21)		

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	Tan	Gloria	CEO
2	Lim	Selina	Board of Directors
3	Li	Mina	Board of Directors
4	Goetze	Peter	Board of Directors
5	Davis	Winna	Board of Directors
6	Mak	George	Board of Directors
7	Huynh	Bonnie	Board of Directors
8	Lee	Clarissa	Board of Directors
9	Lai	Stephen	Board of Directors
10	Chan	Darius	Board of Directors
11	Fong	Derek	Board of Directors
12	Ma	Jackie	Board of Directors
13	Lee	Lynette	Board of Directors
14	Mah	Michelle	Board of Directors
15	Lock	William	Board of Directors
16	Park	Yeoh	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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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 #: 220458

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
Arata Goto	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing & Comm. Dev.	CommDevRFP@Sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Gum Moon Residence Hall	TELEPHONE NUMBER (415) 421-8827
STREET ADDRESS (including City, State and Zip Code) 940 Washington 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) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$27,255		
NATURE OF THE CONTRACT (Please describe) CDBG grant for skill-building and service connection, primarily for residents of the Richmond and Sunset neighborhoods (Project ID - 160130-21)		

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	Tan	Gloria	CEO
2	Lim	Selina	Board of Directors
3	Li	Mina	Board of Directors
4	Goetze	Peter	Board of Directors
5	Davis	Winna	Board of Directors
6	Mak	George	Board of Directors
7	Huynh	Bonnie	Board of Directors
8	Lee	Clarissa	Board of Directors
9	Lai	Stephen	Board of Directors
10	Chan	Darius	Board of Directors
11	Fong	Derek	Board of Directors
12	Ma	Jackie	Board of Directors
13	Lee	Lynette	Board of Directors
14	Mah	Michelle	Board of Directors
15	Lock	William	Board of Directors
16	Park	Yeoh	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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TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
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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
Arata Goto	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing & Comm. Dev.	CommDevRFP@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Gum Moon Residence Hall	TELEPHONE NUMBER (415) 421-8827
STREET ADDRESS (including City, State and Zip Code) 940 Washington 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) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$29,256		
NATURE OF THE CONTRACT (Please describe) CDBG grant for skill-building and service connection, primarily for Gum Moon SRO residents (Project ID - 160129-21)		

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	Tan	Gloria	CEO
2	Lim	Selina	Board of Directors
3	Li	Mina	Board of Directors
4	Goetze	Peter	Board of Directors
5	Davis	Winna	Board of Directors
6	Mak	George	Board of Directors
7	Huynh	Bonnie	Board of Directors
8	Lee	Clarissa	Board of Directors
9	Lai	Stephen	Board of Directors
10	Chan	Darious	Board of Directors
11	Fong	Derek	Board of Directors
12	Ma	Jackie	Board of Directors
13	Lee	Lynette	Board of Directors
14	Mah	Michelle	Board of Directors
15	Lock	William	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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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
Arata Goto	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing & Comm. Dev.	CommDevRFP@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Homebridge, Inc.	TELEPHONE NUMBER (415) 255-2079
STREET ADDRESS (including City, State and Zip Code) 1035 Market St fl-1, 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) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$200,000		
NATURE OF THE CONTRACT (Please describe) CDBG Grant for Occupational Skills Training in Health Care (Project ID - OEWD10)		

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	Burns	Mark	CEO
2	Orlin	Liz	COO
3	weingand	Shantel	CFO
4	Altman	Maya	Board of Directors
5	Barnes	Derek	Board of Directors
6	Brown	James	Board of Directors
7	Chen	Lisa	Board of Directors
8	Chodos	Anna	Board of Directors
9	Dietzen	Cathy	Board of Directors
10	Guina	Edward	Board of Directors
11	Levy	Rick	Board of Directors
12	Malakoff	Forrest	Board of Directors
13	Morrison	Artrese	Board of Directors
14	Nadel	Ross	Board of Directors
15	Pitt	Jessica	Board of Directors
16	Scherer	Cindy	Board of Directors
17	Sedlander	John	Board of Directors
18	Semere	wagahta	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
Dolly Sithounnolat	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing & Comm. Dev.	dolly.sithounnolat@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR La Cocina, Inc.	TELEPHONE NUMBER 415-824-2729
STREET ADDRESS (including City, State and Zip Code) 2948 Folsom Street, San Francisco, CA 94110	EMAIL debbie@lacocinasf.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$70,000		
NATURE OF THE CONTRACT (Please describe) CDBG grant for kitchen incubator and technical assistance for food-based microentrepreneurs (OEWD11)		

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	Alvarez-Rodriguez	Debbie	CEO
2	Arth	Alison	Board of Directors
3	Hower	Lindsay	Board of Directors
4	Lee	Daniel	Board of Directors
5	Colendich	Katie	Board of Directors
6	Alter	Kim	Board of Directors
7	Cutts	Suzanne	Board of Directors
8	Hua	Alina	Board of Directors
9	Lugo	Dilsa	Board of Directors
10	McPherson	Fernay	Board of Directors
11	Nguyen-Yap	Huong	Board of Directors
12	Barr	Laura Sauges	Board of Directors
13	Solomon	Nubia	Board of Directors
14	Xu	Linda	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
Dolly Sithounnolat	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing & Comm Dev	dolly.sithounnolat@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Lawyers' Committee for Civil Rights of the San Francis	TELEPHONE NUMBER 415-543-9444
STREET ADDRESS (including City, State and Zip Code) 131 Steuart Street, Suite 400, San Francisco, CA 94105	EMAIL admin@lccrsf.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$100,000		
NATURE OF THE CONTRACT (Please describe) CDBG Grant for legal services for entrepreneurs (Project ID OEWD12)		

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	Vafaie	Elica	CEO
2	Tillery	Khari	Board of Directors
3	Bowen	Krystal	Board of Directors
4	Burris	John	Board of Directors
5	Cardozo	Raymond	Board of Directors
6	Finigan	Sara	Board of Directors
7	Guggenheim	Steve	Board of Directors
8	Lowe	David	Board of Directors
9	Marshall	Shauna	Board of Directors
10	Sanger	Priya	Board of Directors
11	Singla	Rohit	Board of Directors
12	Sorensen	Jacob	Board of Directors
13	Thompson	Patrick	Board of Directors
14	Goldstein	Barry	Board of Directors
15	Koo	Alyssa	Board of Directors
16	wexler	Stacey	Board of Directors
17	Atkisson	Hilarie	Board of Directors
18	Bal	Collen	Board of Directors
19	Barnes	Suzette	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	Blanco	Maria	Board of Directors
21	Hill	Christin	Board of Directors
22	MCInerney	Thomas	Board of Directors
23	Tovar	Amy	Board of Directors
24			
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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 #: 220458

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
Dolly Sithounnolatt	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing & Comm Dev.	dolly.sithounnolatt@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Main Street Launch	TELEPHONE NUMBER 510-763-4297
STREET ADDRESS (including City, State and Zip Code) 2101 Webster Street, Suite 1200, Oakland, CA 94612	EMAIL jacob@mainstreetlaunch.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$105,000		
NATURE OF THE CONTRACT (Please describe) \$30,000 CDBG Grant for technical assistance for African American business owners and microentrepreneurs \$75,000 CDBG Grant for commercial loans: San Francisco Revolving Loan Fund and Emerging Business Loan Fund.		

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	Singer	Jacob	CEO
2	windross	Joyce	COO
3	Jones III	wendell w.	Board of Directors
4	Green	Gladys	Board of Directors
5	Lindquist	Mark Alan	Board of Directors
6	Jones	Stephanie	Board of Directors
7	Ching	Matt	Board of Directors
8	Hunt	LaSandra	Board of Directors
9	Nelson	Eric	Board of Directors
10	Short	Tiffany	Board of Directors
11	washington	Arthur	Board of Directors
12	wong	Jim	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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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
Dolly Sithounnolat	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing & Comm Dev	dolly.sithounnolat@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Mission Asset Fund	TELEPHONE NUMBER 415-670-9103
STREET ADDRESS (including City, State and Zip Code) 3269 Mission Street, San Francisco, CA 94110	EMAIL jose@missionassetfund.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$70,000		
NATURE OF THE CONTRACT (Please describe) CDBG Grant for expanding small business loans and financial coaching: Building credit and access to capital for microentrepreneurs (Project ID OEWD15)		

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	Quinonez	Jose	CEO
2	Salas	Daniela	COO
3	Krimm	Dave	Board of Directors
4	Seem	Elizabeth Irons	Board of Directors
5	waldstrom	Stephan	Board of Directors
6	Shah	Sagar	Board of Directors
7	Soriano	Aquilina	Board of Directors
8	Legget	Jessica	Board of Directors
9	Blandon	Jorge	Board of Directors
10	Arce	Laura	Board of Directors
11	Torres	Salvador	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

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
Dolly Sithounnolatt	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing & Comm Dev	dolly.sithounnolatt@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Mission Economic Development Agency	TELEPHONE NUMBER 415-282-3334
STREET ADDRESS (including City, State and Zip Code) 2301 Mission Street, San Francisco, CA 94110	EMAIL lgranados@medasf.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$326,005		
NATURE OF THE CONTRACT (Please describe) <ul style="list-style-type: none"> - \$52,000 CDBG Grant for financial capability coaching program for San Francisco's LMI, Latino and immigrant communities. - \$114,005 CDBG Grant for pre- and post-purchase workshops and counseling services for San Francisco's LMI and Latino residents. - \$35,000 CDBG Grant for Mission Street/Outer Mission/Excelsior Commercial Corridors. - \$50,000 CDBG Grant for business technical assistance services for LMI Latino and immigrant entrepreneurs on the Bernal Heights Business, Mission-Bernal, and Mission Street Corridors. - \$75,000 CDBG Grant for technical assistance in English and Spanish for microentrepreneurs. 		

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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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	Grandaos	Luis	CEO
2	Spindle	Jillian	COO
3	Chen-Ok	Priscilla	CFO
4	Terrazas	Dolores	Board of Directors
5	Garcia	Teresa M.	Board of Directors
6	Jones	Whitney	Board of Directors
7	Yaquian-Illescas	Rafael	Board of Directors
8	Cabrera	Ed	Board of Directors
9	Chavarin	Marco	Board of Directors
10	Duron	Ysabel	Board of Directors
11	Herbert	Jabari	Board of Directors
12	Marquez	Carina	Board of Directors
13	Patino	Rebecca	Board of Directors
14	Stein	Kevin	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
Dolly Sithounnolatt	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing & Comm Dev.	dolly.sithounnolatt@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Mission Language and Vocational School	TELEPHONE NUMBER 415-622-5432 ext 2006
STREET ADDRESS (including City, State and Zip Code) 2929 19th Street, San Francisco, CA 94110	EMAIL chefaleks@mlvs.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$100,000		
NATURE OF THE CONTRACT (Please describe) CDBG Grant for healthcare occupational skills training: clinical health care training to local residents (Project ID OEWD19)		

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	Zavaleta	Aleks	Other Principal Officer
2	Alioto	Sebastian	CFO
3	Brown-Gallardo	Tacy	Board of Directors
4	Casco	Esther	Board of Directors
5	Menesini	Michael	Board of Directors
6	Ruiz	Sam	Board of Directors
7	Royale	Eva	Board of Directors
8	Sloan	Raymond	Board of Directors
9	Sanchez	Lidia	Board of Directors
10	Cisneros	Luz	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
Dolly Sithounnolat	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing & Comm Dev	dolly.sithounnolat@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Mission Neighborhood Centers, Inc.	TELEPHONE NUMBER 415-206-7752
STREET ADDRESS (including City, State and Zip Code) 362 Capp Street, San Francisco, CA 94110	EMAIL richard.ybarra@mncsf.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$52,000		
NATURE OF THE CONTRACT (Please describe) CDBG Grant for Academic skill building and GED preparation, primarily for Latinx residents citywide (Project ID 160164-21)		

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	Ybarra	Richard	CEO
2	Alioto	Sebastian	CFO
3	Rodrigue	Jose A.	COO
4	Hayon	Beverly	Board of Directors
5	Nevarez	Christine M.	Board of Directors
6	Schulz	Erich	Board of Directors
7	Collins	Chris M.	Board of Directors
8	Lei	Zonia	Board of Directors
9	Guillen	Maria	Board of Directors
10	Ehrenfeld	Kelly	Board of Directors
11	Quinonez	Jose	Board of Directors
12	De Guzman	Christian	Board of Directors
13	Garcia	claudia	Board of Directors
14	Cartagena	Jose	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 #: 220458

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
Dolly Sithounnolatt	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing & Comm Dev	dolly.sithounnolatt@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR North of Market/Tenderloin Community Benefit Corp.	TELEPHONE NUMBER 415-516-2320
STREET ADDRESS (including City, State and Zip Code) 512 Ellis Street San Francisco CA 94109	EMAIL simon@tlcbd.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$100,000		
NATURE OF THE CONTRACT (Please describe) \$20,000 CDBG Grant for Tenderloin commercial corridor technical assistance \$80,000 CDBG Grant for Tenderloin business retention and outreach		

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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1	Bertrang	Simon	CEO
2	Bang	Siggy	CFO
3	Voung	Michael	Board of Directors
4	Bailard	Rhiannon	Board of Directors
5	Tetenbaum	Adam	Board of Directors
6	Karkhanis	Ashish	Board of Directors
7	McKinnon	Susie	Board of Directors
8	Guggenheim	Regina	Board of Directors
9	Colorado, Jr.	Rene	Board of Directors
10	Abdou	Soha	Board of Directors
11	Kiss	Jennifer	Board of Directors
12	Besser	Gary	Board of Directors
13	Bryant	Adam	Board of Directors
14	Chang	Leigh	Board of Directors
15	Maisel	Naomi	Board of Directors
16	Rodenbeck	Eric	Board of Directors
17	Ramesh	Cindy	Board of Directors
18	Viloria	James	Board of Directors
19			

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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
Dolly Sithounnolatt	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing and Comm Dev	dolly.sithounnolatt@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Ocean Avenue Association	TELEPHONE NUMBER 415-939-2410
STREET ADDRESS (including City, State and Zip Code) 1728 Ocean Avenue - PMB 154, San Francisco, CA 94112	EMAIL Pierres@oaacbd.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$40,000		
NATURE OF THE CONTRACT (Please describe) CDBG Grant for Ocean Avenue small business assistance program (OEWD22)		

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	Smit	Pierre	CEO
2	Lima	Shirley	Board of Directors
3	Kevane	Henry	Board of Directors
4	Chung	Howard	Board of Directors
5	Gon	walee	Board of Directors
6	Godinez-Jackson	Christy	Board of Directors
7	Casias	Dan	Board of Directors
8	Vasquez	Alberto	Board of Directors
9	Santana	Tacha	Board of Directors
10	Rivers	Maurice	Board of Directors
11	Liang	Vivian	Board of Directors
12	Shore	Linda	Board of Directors
13	Craig	Jocelin	Board of Directors
14	Dorsey	Larry	Board of Directors
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9. AFFILIATES AND SUBCONTRACTORS

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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
Gloria woo	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing and Comm Dev	gloria.woo@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR PRC	TELEPHONE NUMBER (415) 777-0333
STREET ADDRESS (including City, State and Zip Code) 170 9th 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) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$100,000		
NATURE OF THE CONTRACT (Please describe) CDBG grant for disability-focused, specialized access point (Project ID - OEWD23)		

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	Schneider	Brian	Board of Directors
2	Roger	Kent M.	Board of Directors
3	Schroeder	Tim	Board of Directors
4	Brown	Chris	Board of Directors
5	Callaghan	Larkin	Board of Directors
6	Frieman	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	CFO
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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
Frolayne Carlos-wallace	415 701 5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Office of Housing and Community Develop	frolayne.carlos-wallace@sfgov.or

5. CONTRACTOR	
NAME OF CONTRACTOR Renaissance Entrepreneurship Center	TELEPHONE NUMBER 415-541-8580
STREET ADDRESS (including City, State and Zip Code) 275 5th 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) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$40,000		
NATURE OF THE CONTRACT (Please describe) CDBG funds for Technical Assistance for Emerging and Established Entrepreneurs in Bayview Hunters Point(Project IDOEW24)		

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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1	Miller	Sharon	CEO
2	Jacoby	Craig	Board of Directors
3	Davis	Alison	Board of Directors
4	Eichmann Datta	Yasmin	Board of Directors
5	Frederiksen	Emily Rose	Board of Directors
6	Gottlieb	Neal	Board of Directors
7	Gandhi	Munish	Board of Directors
8	Gibson	Heidi	Board of Directors
9	Karir	Vishal	Board of Directors
10	Koblis	Philip	Board of Directors
11	wang	Karly	Board of Directors
12	Butler	Meghan	Board of Directors
13	Straus	Sandor	Board of Directors
14	Logan	Duncan	Board of Directors
15	McCline	Richard	Board of Directors
16	Kirvin	Lisa	COO
17	House	Douglas	CFO
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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
Frolayne Carlos-wallace	415 701 5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Office of Housing and Community Develop	frolayne.carlos-wallace@sfgov.or

5. CONTRACTOR	
NAME OF CONTRACTOR Renaissance Entrepreneurship Center	TELEPHONE NUMBER 415-541-8580
STREET ADDRESS (including City, State and Zip Code) 275 5th 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) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$40,000		
NATURE OF THE CONTRACT (Please describe) CDBG funds for Technical assistance in English and Spanish to women entrepreneurs (Project OEWD26)		

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	Miller	Sharon	CEO
2	Craig	Jacoby	Board of Directors
3	Davis	Alison	Board of Directors
4	Eichmann Datta	Yasmin	Board of Directors
5	Frederiksen	Emily Rose	Board of Directors
6	Gottlieb	Neal	Board of Directors
7	Gandhi	Munish	Board of Directors
8	Gibson	Heidi	Board of Directors
9	Karir	Vishal	Board of Directors
10	Koblis	Philip	Board of Directors
11	Want	Karly	Board of Directors
12	Butler	Meghan	Board of Directors
13	Straus	Sandor	Board of Directors
14	Logan	Duncan	Board of Directors
15	McCline	Richard	Board of Directors
16	Kirvin	Lisa	COO
17	House	Douglas	CFO
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9. AFFILIATES AND SUBCONTRACTORS

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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 #: 220458

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
Frolayne Carlos-wallace	415 701 5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Office Of Housing and Community Develop	frolayne.carlos-wallace@sfgov.or

5. CONTRACTOR	
NAME OF CONTRACTOR Renaissance Entrepreneurship Center	TELEPHONE NUMBER 415-541-8580
STREET ADDRESS (including City, State and Zip Code) 275 5th Street, San Francisco, CA 94103	EMAIL sharon@rencenter.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$40,000		
NATURE OF THE CONTRACT (Please describe) Lower Fillmore commercial corridor technical assistance		

7. COMMENTS

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
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5	Gandhi	Munish	Board of Directors
6	Gibson	Heidi	Board of Directors
7	Karir	Vishal	Board of Directors
8	Koblis	Phillip	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
Frolayne Carlos-wallace	415 701 5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Office of Housing and Community Develop	frolayne.carlos-wallace@sfgov.or

5. CONTRACTOR	
NAME OF CONTRACTOR Renaissance Entrepreneurship Center	TELEPHONE NUMBER 415-541-8580
STREET ADDRESS (including City, State and Zip Code) 275 5th Street, San Francisco, CA 94103	EMAIL sharon@rencenter.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$75,000		
NATURE OF THE CONTRACT (Please describe) CDBG Funds for Technical Assistance for Entrepreneurs provided by Renaissance SoMa (Project ID: OEWD25).		

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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5	Frederiksen	Emily Rose	Board of Directors
6	Gottlieb	Neal	Board of Directors
7	Gandhi	Munish	Board of Directors
8	Gibson	Heidi	Board of Directors
9	Karir	Vishal	Board of Directors
10	Koblis	Phillip	Board of Directors
11	wang	Karly	Board of Directors
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14	Logan	Duncan	Board of Directors
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16	Kirvin	Lisa	COO
17	House	Douglas	CFO
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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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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
Legislative Clerks Division	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
Frolayne Carlos-wallace	415 701 5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Office of Housing and Community Devel	frolayne.carlos-wallace@sfgov.or

5. CONTRACTOR	
NAME OF CONTRACTOR San Francisco Housing Development Corporation	TELEPHONE NUMBER 415-822-1022
STREET ADDRESS (including City, State and Zip Code) 4439 3rd Street, San Francisco, CA 94124v	EMAIL David@sfhdc.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$31,579		
NATURE OF THE CONTRACT (Please describe) CDBG funds for Homeownership education and counseling citywide (Project ID, 160189-21b)		

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	Sobel	David	CEO
2	Golvin	Ben	Board of Directors
3	Turner	Charles	Board of Directors
4	Vincent	Dorris	Board of Directors
5	walker	Eddie	Board of Directors
6	Beiro	Noreen	Board of Directors
7	wong	Daniel	Board of Directors
8	kaslofsky	Thor	Board of Directors
9	Esilden	Jennifer	Board of Directors
10	Robinson	Lena	Board of Directors
11	McGill	Antoinette	Board of Directors
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9. AFFILIATES AND SUBCONTRACTORS

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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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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
Frolayne Carlos-wallace	415 701 5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Office of Housing and Community Develop	frolayne.carlos-wallace@sfgov.or

5. CONTRACTOR	
NAME OF CONTRACTOR SF Lesbian Gay Bisexual Transgender Comm Center	TELEPHONE NUMBER 415-865-5521
STREET ADDRESS (including City, State and Zip Code) 1800 Market Street, San Francisco CA 94102	EMAIL RebeccaR@sfcenter.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$70,000		
NATURE OF THE CONTRACT (Please describe) CDBG funds for technical assistance, credit building microloans, workshops and mentorship (project: OEWD28)		

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	Jesmonth	Sally	Board of Directors
2	Albright	Mika	Board of Directors
3	Brown	Jim	Board of Directors
4	Millard	Johnathan	Board of Directors
5	Paul	Chris	Board of Directors
6	Sun	Jeff	Board of Directors
7	King	Michelle	Board of Directors
8	DeLa O	Robert	Board of Directors
9	Natoli	Jane	Board of Directors
10	Rice	Pamela	Board of Directors
11	Gutierrez	Carlos	Board of Directors
12	Hernandez	Genesis	Board of Directors
13	Kulkami	Hrishni	Board of Directors
14	Perrson	Maceo	Board of Directors
15	Rolfe	Rebecca	CEO
16	Grant	Jennifer	CFO
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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
Frolayne Carlos-wallace	415 701 5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Office of Housing and Comm Development	frolayne.carlos-wallace@sfgov.or

5. CONTRACTOR	
NAME OF CONTRACTOR San Francisco Small Business Development Center	TELEPHONE NUMBER 415-937-7232
STREET ADDRESS (including City, State and Zip Code) 1 Dr. Carlton B. Goodlett Place, San Francisco, CA 941	EMAIL angel.cardoz@sfgov.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$200,000		
NATURE OF THE CONTRACT (Please describe) CDBG funds for Small Business Development Center (Project ID: OEWD29)		

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	Cardoz	Angeł	CEO
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#	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
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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 #: 220458

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
Frolayne Carlos-wallace	415 701 5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Office of Housing and Comm Develop	frolayne.carlos-wallace@sfgov.or

5. CONTRACTOR	
NAME OF CONTRACTOR San Francisco Study Center, f.s Housing Right Committe	TELEPHONE NUMBER 415-626-1650
STREET ADDRESS (including City, State and Zip Code) 1663 Mission Street, #310, San Francisco, CA 94103	EMAIL geoff@studycenter.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$564,034		
NATURE OF THE CONTRACT (Please describe) CDBG funds for tenant outreach Education and Counseling and Anti-Displacement Coalition. (Project ID 160138-21)		

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	Link	Geoffrey	CEO
2	Burks	John	Board of Directors
3	Livingston	Richard	Board of Directors
4	Yee	Tina	Board of Directors
5	True	Reiko	Board of Directors
6	Margaronis	Stas	Board of Directors
7	McWilliams	Jim	Board of Directors
8	Fong-Torres	Ben	Board of Directors
9	Kutnick	Ben	Board of Directors
10	Elbga1	Hazim	Board of Directors
11	Vera	Leonor	CEO
12	Okamura	Jackie	CEO
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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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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
Frolayne Carlos-wallace	415 701 5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Office of Housing and Comm Develop	frolayne.carlos-wallace@sfgov.or

5. CONTRACTOR	
NAME OF CONTRACTOR Self-Help for the Elderly	TELEPHONE NUMBER 415-677-7600
STREET ADDRESS (including City, State and Zip Code) 731 Sansome Street, Suite 100, San Francisco, CA 94111	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$15,000		
NATURE OF THE CONTRACT (Please describe) CDBG funds for Neighborhood Commercial Revitalization (project id:OEWD30)		

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	Chung	Anni	CEO
2	wang	Linda	Board of Directors
3	Mar	Patricia	Board of Directors
4	Kaung	Janie	Board of Directors
5	wong	May	Board of Directors
6	Cheng	Angel	Board of Directors
7	Koo	Rosalyn	Board of Directors
8	Schulte	Bill	Board of Directors
9	Chang	Mary	Board of Directors
10	Au	Yat Pang	Board of Directors
11	Li	Dominic	Board of Directors
12	Lee	Jerry	Board of Directors
13	Nair	Leny	CFO
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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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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
Frolayne Carlos-wallace	415 701 5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Office of Housing and Comm Development	frolayne.carlos-wallace@sfgov.or

5. CONTRACTOR	
NAME OF CONTRACTOR SFMade, Inc.	TELEPHONE NUMBER 415-408-5605
STREET ADDRESS (including City, State and Zip Code) 150 Hooper Street, Unit 200, San Francisco, CA 94107	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$65,000		
NATURE OF THE CONTRACT (Please describe) CDBG funds for manufacturing Incubation and Accelerator Program, technical assistance for local manufacturers (Project ID: OEWD31).		

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	Lees	Janet	CEO
2	Ovian	Rosemarie	Board of Directors
3	Allbin	Alicia	Board of Directors
4	Burton	Tracy	Board of Directors
5	Knorpp	Jon	Board of Directors
6	Pusateri	Michelle	Board of Directors
7	wang	wenli	Board of Directors
8	Bell	Veronica	Board of Directors
9	Simpson	Ulrich	Board of Directors
10	Groff	Gary	Board of Directors
11	Hazlett	Brett	CFO
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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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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
Frolayne Carlos-wallace	415 701 5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Office of Housing and Community Develop	frolayne.carlos-wallace@sfgov.or

5. CONTRACTOR	
NAME OF CONTRACTOR Southeast Asian Development Center	TELEPHONE NUMBER 415-771-2600
STREET ADDRESS (including City, State and Zip Code) 166 Eddy 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) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$55,000		
NATURE OF THE CONTRACT (Please describe) CDBG funds for technical assistance for small businesses in Visitacion Valley (Project ID:OEWD32)		

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	Nilumol	Winston	Board of Directors
2	Ho	Jessilyn	Board of Directors
3	Pham	Eric	Board of Directors
4	Tran	Jerome	Board of Directors
5	Hua	Jimmy	Board of Directors
6	Mo	Jennifer	Board of Directors
7	Harlan	Kim	Board of Directors
8	Abraham	Sandeep	Board of Directors
9	Xu	webber	Board of Directors
10	Young	Judy	CEO
11	Mo	Jennifer	Board of Directors
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9. AFFILIATES AND SUBCONTRACTORS

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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
Frolayne Carlos-wallace	415 701 5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Office of Housing and Community Develop	frolayne.carlos-wallace@sfgov.or

5. CONTRACTOR	
NAME OF CONTRACTOR Southeast Asian Development Center	TELEPHONE NUMBER 415-771-2600
STREET ADDRESS (including City, State and Zip Code) 166 Eddy 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) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$75,000		
NATURE OF THE CONTRACT (Please describe) CDBG funds for technical assistance in English and Chinese for small businesses citywide (Project ID:OEWD33)		

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	Young	Judy	CEO
2	Mo	Jennifer	Board of Directors
3	Nilumol	Winston	Board of Directors
4	Ho	Jessilyn	Board of Directors
5	Pham	Eric	Board of Directors
6	Tran	Jerome	Board of Directors
7	Hua	Jimmy	Board of Directors
8	Harlan	Kim	Board of Directors
9	Abraham	Sandeep	Board of Directors
10	Xu	webber	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 #: 220458

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
Frolayne Carlos-wallace	415 701 5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Office of Housing and Community Develop	frolayne.carlos-wallace@sfgov.or

5. CONTRACTOR	
NAME OF CONTRACTOR Swords to Plowshares: Veterans Rights Organization	TELEPHONE NUMBER 415-252-4788
STREET ADDRESS (including City, State and Zip Code) 1060 Howard Street 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) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$65,811		
NATURE OF THE CONTRACT (Please describe) Legal representation and advocacy for VA benefits, primarily for homeless and low-income veterans (Project ID:160204-21)		

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	Blecker	Michael	CEO
2	Cane	Julie	Board of Directors
3	Seymour	Del	Board of Directors
4	Fassie	Micheal	Board of Directors
5	Plath	Stephen	Board of Directors
6	Cox	Paul	Board of Directors
7	Houlberg	Rick	Board of Directors
8	Deksheniaks	Micheal	Board of Directors
9	Thiel	Michael	Board of Directors
10	Marquez	John	Board of Directors
11	Edwards	Erik	Board of Directors
12	Cane	Julie	Board of Directors
13	Kennedy	Ronan	Board of Directors
14	Buzaid	Felipe	Board of Directors
15	Richardson	Kate	Board of Directors
16	Winston	Leon	COO
17	Frost	Karen	CFO
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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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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
Frolayne Carlos-wallace	415 701 5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Office of Housing and Comm Development	frolayne.carlos-wallace@sfgov.or

5. CONTRACTOR	
NAME OF CONTRACTOR Tenderloin Housing Clinic	TELEPHONE NUMBER 415-885-3286
STREET ADDRESS (including City, State and Zip Code) 126 Hyde 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) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$992,720		
NATURE OF THE CONTRACT (Please describe) CDBG funds for Tenant Right to Counsel Tenant Right to Counsel partner providing full-scope legal representation for residents facing eviction (Project ID:160207-21)		

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	Shaw	Randy	CEO
2	Tiedmann	Chris	Board of Directors
3	Dufty	Otto	Board of Directors
4	Brophy	Ken	Board of Directors
5	wilson	Randy	Board of Directors
6	Medeiros	Jodie	Board of Directors
7	Seagraves	Gail	Board of Directors
8	Pujals	Fernando	Board of Directors
9	Allen	Tabitha	COO
10	Tang	wynne	CFO
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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
Frolayne Carlos-wallace	415 701 5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Office of Housing and Community Develop	frolayne.carlos-wallace@sfgov.or

5. CONTRACTOR	
NAME OF CONTRACTOR Wu Yee Children's Services	TELEPHONE NUMBER 415-677-0100
STREET ADDRESS (including City, State and Zip Code) 827 Broadway Street, 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) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$96,000		
NATURE OF THE CONTRACT (Please describe) CDBG funds for service connection, primarily for API residents citywide (Project ID: 160222-21)		

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	Walters	Monica	CEO
2	Thomas	Sonya	Board of Directors
3	Ngo	Catherine	Board of Directors
4	Wu	Raymond	Board of Directors
5	Donovan	Sharon	Board of Directors
6	Weng	Sandra	Board of Directors
7	Lee	Albert	Board of Directors
8	Ho	Carmen	Board of Directors
9	Yang	Cindy	Board of Directors
10	Delacruz	Raymond	Board of Directors
11	Kuo	Christopher	Board of Directors
12	Marotta	Dean	Board of Directors
13	Yan	Cindy	Board of Directors
14	Ziegler	David	Board of Directors
15	Neumann	Mike	COO
16	Tao	Mark	CFO
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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
Frolayne Carlos-wallace	415 701 5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Office of Housing and Community Develop	frolayne.carlos-wallace@sfgov.or

5. CONTRACTOR	
NAME OF CONTRACTOR Wu Yee Children's Services	TELEPHONE NUMBER 415-677-0100
STREET ADDRESS (including City, State and Zip Code) 827 Broadway Street, 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) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$100,000		
NATURE OF THE CONTRACT (Please describe) CDBG funds for Family Child Care Small Business Development Program- Technical assistance for child care businesses (Project ID: OEWD34)		

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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7	Lee	Albert	Board of Directors
8	Ho	Carmen	Board of Directors
9	Yang	Cindy	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
Frolayne Carlos-wallace	415 701 5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Office of Housing and Community Develop	frolayne.carlos-wallace@sfgov.or

5. CONTRACTOR	
NAME OF CONTRACTOR Young Community Developers, Inc.	TELEPHONE NUMBER 415-822-3491
STREET ADDRESS (including City, State and Zip Code) 1715 Yosemite Avenue, 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) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$50,000		
NATURE OF THE CONTRACT (Please describe) CDBG funds for 100% College Prep, academic skill building and short-term case management, primarily for Alice Griffith youth (Project ID: 160223-21)		

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	Brookter	Dion Jay	CEO
2	Spencer	sedrick	Board of Directors
3	Moses	Toye	Board of Directors
4	Tatum	Carol	Board of Directors
5	Turner	Charles	Board of Directors
6	Everhart	Claude	Board of Directors
7	Jones	Shirley	Board of Directors
8	Anderson	Nadia	Board of Directors
9	Flores	Manny	Board of Directors
10	Andrew	Rhonda	Board of Directors
11	Parikh	Mitesh	Board of Directors
12	Smith	Cheryl	Board of Directors
13	Potashner	Eric	Board of Directors
14	Yoo	Jenny	CFO
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9. AFFILIATES AND SUBCONTRACTORS

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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 #: 220458

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
Frolayne Carlos-wallace	415 701 5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Office of Housing and Community Develop	frolayne.carlos-wallace@sfgov.or

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NAME OF CONTRACTOR Young Community Developers, Inc.	TELEPHONE NUMBER 415-822-3491
STREET ADDRESS (including City, State and Zip Code) 1715 Yosemite Avenue, 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) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$430,029		
NATURE OF THE CONTRACT (Please describe) CDBG funds for Neighborhood access point - IPO (Project ID: OEWD35)		

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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5	Everhart	Claude	Board of Directors
6	Jones	Shirley	Board of Directors
7	Anderson	Nadia	Board of Directors
8	Flores	Manny	Board of Directors
9	Andrew	Rhonda	Board of Directors
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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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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
Arata Goto	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing & Comm. Dev.	CommDevRFP@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Young Men's Christian Association of San Francisco	TELEPHONE NUMBER 415-772-5500
STREET ADDRESS (including City, State and Zip Code) 50 California St Ste. 650, San Francisco, CA 94111	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220458
DESCRIPTION OF AMOUNT OF CONTRACT \$812,873		
NATURE OF THE CONTRACT (Please describe) <p>\$313,521 CDBG Grant for Community engagement and service connection, primarily for residents of Hunters View and Sunnydale-Velasco</p> <p>\$47,352 CDBG Grant for Community engagement and service connection, primarily for API families in single room occupancy hotels (SROs) in Chinatown</p> <p>\$212,000 CDBG Grant for Skill building, ESL training and service connection, primarily for API residents of Chinatown</p> <p>\$120,000 CDBG Grant for Service connection, primarily for API residents citywide</p> <p>\$120,000 CDBG Grant for Service connection, primarily for residents of District 11</p>		

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	Bruning-Miles	Jamie	CEO
2	Grigsby	Mittie	CFO
3	Rich	Chip	COO
4	Price	Amy	Board of Directors
5	Chang	Annabel	Board of Directors
6	welborn	Caryl	Board of Directors
7	Patz	Christopher	Board of Directors
8	kelly	David	Board of Directors
9	Prosnitz	Eric	Board of Directors
10	Teague	Gary	Board of Directors
11	Gregoty-Burns	Gina	Board of Directors
12	Farrell	Glenn	Board of Directors
13	Evans	Gregory	Board of Directors
14	Angel	Jason	Board of Directors
15	Shoda	Jennifer	Board of Directors
16	welland	Jeremy	Board of Directors
17	Baker	John	Board of Directors
18	Berg	John	Board of Directors
19	willingham	John	Board of Directors

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
20	Eberly	Jon	Board of Directors
21	Estrada	Josue	Board of Directors
22	Adukia	Lisa	Board of Directors
23	Pisano	Marianna	Board of Directors
24	Bley	Mark	Board of Directors
25	Robinson	Michael	Board of Directors
26	Fichera	Michele	Board of Directors
27	Richardson	Mollie	Board of Directors
28	Susko	Peter	Board of Directors
29	Ly	Phat	Board of Directors
30	Gadamasetti	Pratik	Board of Directors
31	Chisholm	Richard	Board of Directors
32	Robins	Richard	Board of Directors
33	Li	Samuel	Board of Directors
34	Seitz	Shane	Board of Directors
35	Pasarell Tsai	Shelby	Board of Directors
36	Hankins	Stephen	Board of Directors
37	Rogers	Stephen	Board of Directors
38	Lee	Theodora	Board of Directors

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
39	Kearney	Thomas	Board of Directors
40	Parker	Tacing	Other Principal Officer
41	Lee	Kari	Other Principal Officer
42	Daskalakis	Evelyn	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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