

File No. 250545

Committee Item No. 11

Board Item No. _____

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Budget and Finance Committee Date June 4, 2025

Board of Supervisors Meeting Date _____

Cmte Board

<input type="checkbox"/>	<input type="checkbox"/>	Motion
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Resolution
<input type="checkbox"/>	<input type="checkbox"/>	Ordinance
<input type="checkbox"/>	<input type="checkbox"/>	Legislative Digest
<input type="checkbox"/>	<input type="checkbox"/>	Budget and Legislative Analyst Report
<input type="checkbox"/>	<input type="checkbox"/>	Youth Commission Report
<input type="checkbox"/>	<input type="checkbox"/>	Introduction Form
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Department/Agency Cover Letter and/or Report
<input type="checkbox"/>	<input type="checkbox"/>	MOU
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Grant Information Form
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Grant Budget
<input type="checkbox"/>	<input type="checkbox"/>	Subcontract Budget
<input type="checkbox"/>	<input type="checkbox"/>	Contract/Agreement
<input type="checkbox"/>	<input type="checkbox"/>	Form 126 – Ethics Commission
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Award Letter
<input type="checkbox"/>	<input type="checkbox"/>	Application
<input type="checkbox"/>	<input type="checkbox"/>	Public Correspondence

OTHER (Use back side if additional space is needed)

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>DPH Gift Acknowledgement</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Behested Payment Statement Exception</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>DPH Gift Questionnaire</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Health Commission Resolution No. 25-04 and 25-03 3/3/2025</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>DPH Statement on Retroactivity 5/29/2025</u>
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____

Completed by: Brent Jalipa Date May 29, 2025

Completed by: Brent Jalipa Date _____

1 [Accept and Expend Gift - Retroactive - Epic Systems Corporation - RAMS Richmond Area
2 Multi Services - \$37,000]

3 **Resolution retroactively authorizing the Department of Public Health to accept and**
4 **expend a monetary gift, entitled “RAMS Richmond Area Multi Services,” in the amount**
5 **of \$37,000 from the Epic Systems Corporation to help low income and at-risk**
6 **populations for the period of July 1, 2023, through June 30, 2024.**

7
8 WHEREAS, The Epic Systems Corporation (ESC) has donated the “RAMS Richmond
9 Area Multi Services” to the San Francisco Department of Public Health (DPH) in the amount
10 of \$37,000; and

11 WHEREAS, The funds will be used to provide high-quality designated Information
12 Technology support services to Behavioral Health Services (Avatar Helpdesk; Desktop;
13 Advanced Avatar Helpdesk; Advanced Desktop; Consumer Portal); and engage San
14 Francisco resident consumers for improved emotional/physical well-being and quality of life,
15 positive engagement in the community, increase self-sufficiency, and obtain and retain
16 competitive employment; and

17 WHEREAS, The ESC provides gifts to entities that help low income and at-risk
18 populations; now, therefore, be it

19 RESOLVED, That the Board of Supervisors approves the gift and retroactively
20 authorizes DPH to accept and expend a gift of cash in the value of \$37,000 donated by the
21 ESC; and, be it

22 FURTHER RESOLVED, That the proceeds of the gift by the ESC will be accepted and
23 expended consistent with the San Francisco Administrative Code Sections governing the
24 acceptance of gifts to the City and County of San Francisco, including the San Francisco
25 Administrative Code, Section 10.100-305; and, be it

1 FURTHER RESOLVED, That the Board of Supervisors extends its gratitude to the
2 ESC for the generous gift to the City and County of San Francisco in support of DPH.

Recommended:

Approved: _____

Mayor

/s/

Daniel Tsai

Approved: _____
/s/

Director of Health

Controller

File Number: 250545
(Provided by Clerk of Board of Supervisors)

Gift Resolution Information Form
(Effective July 2011)

Purpose: Accompanies proposed Board of Supervisors resolutions authorizing a Department to accept and expend gift funds.

The following describes the gift referred to in the accompanying resolution:

1. Gift Title: **RAMS Richmond Area Multi Services**
2. Department: **Department of Public Health**
3. Contact Person: **Eric Raffin** Telephone: **(916) 258-7288**
4. Gift Approval Status (check one):
☒ Approved by funding agency ☐ Not yet approved
5. Amount of Gift Funding Approved or Applied for: **\$37,000**
- 6a. Matching Funds Required: **\$0**
b. Source(s) of matching funds (if applicable): **N/A**
- 7a. Gift Source Agency: **Epic Systems Corporation**
b. Gift Pass-Through Agency (if applicable): **N/A**
8. Proposed Gift Project Summary: **Epic Systems Corporation sent a donation to be allocated to the RAMS Richmond Area Multi Services. The funds will be used to (1) provide high-quality designated Information Technology support services to Behavioral Health Services (Avatar Helpdesk; Desktop; Advanced Avatar Helpdesk; Advanced Desktop; Consumer Portal) and (2) engage San Francisco resident consumers for improved emotional/physical well-being and quality of life, positive engagement in the community, increase self-sufficiency, and obtain & retain competitive employment.**
9. Gift Project Schedule, as allowed in approval documents, or as proposed:
Start-Date: **07/01/2023** End-Date: **06/30/2024**
- 10a. Amount budgeted for contractual services: **\$37,000**
b. Will contractual services be put out to bid? **No**
c. If so, will contract services help to further the goals of the Department's Local Business Enterprise (LBE) requirements? **N/A**
d. Is this likely to be a one-time or ongoing request for contracting out? **One-time**
- 11a. Does the budget include indirect costs? ☐ Yes ☒ No
b1. If yes, how much? \$ **N/A**
b2. How was the amount calculated? **N/A**

c1. If no, why are indirect costs not included?

☐ Not allowed by Gifting agency

☒ To maximize use of gift funds on direct services

☐ Other (please explain):

c2. If no indirect costs are included, what would have been the indirect costs? **5% of Direct Costs**

12. Any other significant gift requirements or comments:

The gift does not require an ASO amendment and does not create net new positions.

We respectfully request for approval to accept and expend these funds retroactive to July 1, 2023. The Department received the award on December 5, 2023.

The donor is a Private entity.

Fund ID:	14820
Department ID:	162643
Project Desc:	EPIC RAMS Richmond Area Multi Services
Project ID:	10041016
Authority ID:	10001
Activity ID:	0001

****Disability Access Checklist** (Department must forward a copy of all completed Gift Information Forms to the Mayor's Office of Disability)**

13. This Gift is intended for activities at (check all that apply):

<input checked="" type="checkbox"/> Existing Site(s)	<input type="checkbox"/> Existing Structure(s)	<input type="checkbox"/> Existing Program(s) or Service(s)
<input type="checkbox"/> Rehabilitated Site(s)	<input type="checkbox"/> Rehabilitated Structure(s)	<input type="checkbox"/> New Program(s) or Service(s)
<input type="checkbox"/> New Site(s)	<input type="checkbox"/> New Structure(s)	

14. The Departmental ADA Coordinator or the Mayor's Office on Disability have reviewed the proposal and concluded that the project as proposed will be in compliance with the Americans with Disabilities Act and all other Federal, State and local disability rights laws and regulations and will allow the full inclusion of persons with disabilities. These requirements include, but are not limited to:

1. Having staff trained in how to provide reasonable modifications in policies, practices and procedures;
2. Having auxiliary aids and services available in a timely manner in order to ensure communication access;
3. Ensuring that any service areas and related facilities open to the public are architecturally accessible and have been inspected and approved by the DPW Access Compliance Officer or the Mayor's Office on Disability Compliance Officers.

If such access would be technically infeasible, this is described in the comments section below:

Comments:

Departmental ADA Coordinator or Mayor's Office of Disability Reviewer:

Toni Rucker, PhD
(Name)

DPH ADA Coordinator
(Title)

Date Reviewed: 3/12/2025 | 10:48 AM PDT

DocuSigned by:
Toni Rucker
A04292F7331F44D...
(Signature Required)

Department Head or Designee Approval of Gift Information Form:

Daniel Tsai
(Name)

Director of Health
(Title)

Date Reviewed: 3/25/2025 | 3:47 PM PDT

DocuSigned by:
Jenny Louie
40CFE23DD08B1204...
(Signature Required)
Jenny Louie, COO for Daniel Tsai

Epic

Epic Systems Corporation
One-Year Budget
July 1, 2023 – June 30, 2024
RAMS Richmond Area Multi Services
Project ID: 10041016

DIRECT COSTS	Fiscal Year 24	Totals
Contractual costs		
- Richmond Area Multi Services	37,000	37,000
Non-personnel services Sub-Total	\$37,000	\$37,000
TOTAL	\$37,000	\$37,000



San Francisco Department of Public Health

Grant Colfax, MD
Director of Health

City and County of San Francisco
London N. Breed
Mayor

January 4, 2024

Epic Systems Corporation



Dear [REDACTED],

Thank you for your contribution of cash received on [REDACTED]. Please keep this written acknowledgement of your gift to the City for your tax records.

Description of Donated Property:

(It is the responsibility of the donor to estimate the fair market value of donated items)

Description of Donated property	Quantity	Cash Value	Financial Interest
Check	1	\$37,000	Contract with City

No goods or services were provided by the City in connection with the gift.

Thank you for your support!

Very truly yours,

DocuSigned by:

Greg Wagner

28527524752949E...

Dr. Grant Colfax
Director of Health
Department of Public Health
San Francisco CA 94102
Greg Wagner, COO for

Epic

2-28

710

PAY TO THE
ORDER OF

US Dollars

VOID AFTER 180 DAYS

San Francisco, CA 94102
USA

Check

Vendor : , Office of the Director of Health San Francisco Department of Public Health

Invoice number Description

Invoice date Payment amount

12.5.23 RAMS Richmond Area Multi Services

12/5/2023

Total



[Redacted]

Office of the Director of Health
San Francisco Department of Public Health
[Redacted]
San Francisco, CA 94102

To Whom It May Concern,

Thank you for your good work helping your patients get well and stay well. We appreciate the opportunity to support your important work by sending you a donation, allocated to the following:

\$37,000 – RAMS Richmond Area Multi Services

Note, this is a straight donation, not a sponsorship, to benefit your programs/services. Please send a gift receipt for the full amount of the donation to [Redacted] or mail to the attention of Accounts Payable, at the address shown below.

Give me a call if you have any questions or need additional information.

Sincerely,

[Redacted]



City and County of San Francisco
London N. Breed
Mayor

San Francisco Department of Public Health

Grant Colfax, MD
Director of Health

Behested Payment Solicitation Rules Exception Form & Certification

Directions: Please complete, sign, and return pages 1-2 of the form below, filling in all blanks with the requested information and selecting only one of the three check boxes.

Name of Grant/Gift (the Award): RAMS Richmond Area Multi Services

Amount: \$ 37,000

Date Received & Term of Grant/Gift: January 2, 2024, for CY 2024

Name of Original Source of the Grant/Gift (the Donor): Epic Systems Corporation

Purpose of Form: Section 3.620 of the San Francisco Campaign and Governmental Conduct Code (the SF C&GCC) prohibits City and County of San Francisco (City) officers and employees from directly or indirectly soliciting a behested payment from an interested party. A **behested payment** is a payment made at the request of the City officer or employee for a legislative, governmental, or charitable purpose. **Interested parties** include, among other things, either a) a participant involved in an administrative enforcement or license, permit, or other entitlement proceeding before any officer or employee within DPH or b) a person or entity that contracts with or seeks to contract with the City, the San Francisco Unified School District, or the San Francisco Community College District where the total anticipated or actual value of such contracts within a fiscal year equals or exceeds \$100,000. **Interested parties** also include contract or expenditure lobbyists and permit consultants. Donors should refer to Section 3.620 of the SF C&GCC and related rules and regulations for more detailed information about behested payments.

This form is to be used by the San Francisco Department of Public Health (DPH) and the Donor listed above to certify that the listed Award is not a solicitation of a behested payment as determined by Regulation 3.620-8 of the San Francisco [Ethics Commission Regulations](#). Awards that meet the criteria listed in Regulation 3.620-8 for not being a solicited behested payment are exempt from the prohibition listed in Section 3.620 of the San Francisco Campaign and Governmental Conduct Code and can be accepted and expended by the City and/or DPH.

Certification: Donor may be an interested party as defined in Section 3.620 of the SF C&GCC and related [Ethics Commission Regulations](#). Because Donor is also the source of the Award listed above (*either as the original source or as an intermediary that is sub-awarding from a different source*), the City can only accept the funds if the Award qualifies for an exception to the restriction on soliciting a behested payment from an interested party under Section 3.620 of the SF C&GCC or [Ethics Commission Regulations](#).



City and County of San Francisco
London N. Breed
Mayor

San Francisco Department of Public Health

Grant Colfax, MD
Director of Health

Behested Payment Solicitation Rules Exception Form & Certification

Please certify, by selecting which one of the following options is most applicable, that the listed information is accurate related to the Award listed above:

- ☐ **Competitive Award.** The Award is being made by Donor pursuant to a competitively awarded grant for which DPH or a DPH designee applied, as described in Ethics Commission Regulation 3.620-8(a) (*copy located on back page*). Donor certifies that the Award is competitively awarded under its own processes—the SF C&GCC and Ethics Commission Regulations do not define that concept. Note that the negotiation by DPH and the Donor and expansion of the terms of any such grant agreement does not make the Award a prohibited behested payment.
- ☐ **Award Initiated by Donor with a Grant Agreement.** The Award is being made by Donor pursuant to a grant agreement between Donor and the City/DPH, and the Award was initiated by Donor, as described in Ethics Commission Regulation 3.620-8(b) (*copy located on back page*). Donor certifies that the Award was not initiated by DPH or a DPH designee. Note that the negotiation by DPH and the Donor and expansion of the terms of any such grant agreement, after initiation by the Donor, does not make the Award a prohibited behested payment.
- ☒ **Award Initiated by Donor Without a Grant Agreement.** The Award is a gift or other payment from Donor to the City/DPH, and the Award was initiated by Donor, as described in Ethics Commission Regulation 3.620-8(c) (*copy located on back page*). Donor certifies that the Award was not initiated by DPH or a DPH designee. This gift or payment must not confer a personal benefit on any City official or employee. Gifts or payments that confer a personal benefit include, but are not limited to, food, drinks, holiday parties, and items intended for employee appreciation or recognition.

I [Signatory Name] [REDACTED], as an authorized representative of Donor, certify and affirm that the above information is true and accurate, and I acknowledge that providing false or inaccurate information may violate City rules. I am authorized to and accordingly confirm that Donor, upon request by City, DPH, and/or the San Francisco Ethics Commission, will provide any requested documentation that Donor is legally allowed to provide which demonstrates the accuracy of the statements above.

Signatory

Date

Signatory Title



City and County of San Francisco
London N. Breed
Mayor

San Francisco Department of Public Health

Grant Colfax, MD
Director of Health

Behested Payment Solicitation Rules Exception Form & Certification

Copy of Relevant Ethics Commission Regulations for Reference (Aug. 2024)
(please go to [Ethics Commission Regulations](#) for the current, applicable regulations)

Regulation 3.620-8: Exceptions

The following actions are not solicitations of behested payments for the purposes of Section 3.620:

- (a) Applying for a competitively awarded grant with or directly from an interested party, if the City officer or designated employee is applying on behalf of their department. Negotiating the terms of, entering into, performing pursuant to, amending, and expanding such a grant agreement between the source of the grant, the interested party, and the City is also not soliciting a behested payment.
- (b) Negotiating the terms of, entering into, performing pursuant to, amending, or expanding a grant agreement between an interested party and the City, on behalf of the officer or designated employee's department, that was initiated by an interested party. Any City officer or designated employee using this exception bears the burden of proving that they did not initiate the grant offer or negotiations. This proof could be demonstrated, for example, through copies of emails or other written communications or other means.
- (c) Coordinating the acceptance of gifts or other payments to the City that have been initiated by an interested party. Any City officer or designated employee using this exception bears the burden of proving that they did not initiate the payment from the interested party. This proof could be demonstrated, for example, through copies of emails or other written communications or other means. Any gift or payment accepted using this exception cannot confer a personal benefit on any City officials. Gifts or payments that confer a personal benefit include, but are not limited to food, drinks, holiday parties, and items intended for employee appreciation or recognition. ...



San Francisco
Department of Public Health
City and County of San Francisco
Mayor Daniel L. Lurie



Department of
PUBLIC HEALTH

[REDACTED]
Epic Systems Corporation
[REDACTED]

To Whom it may Concern,

Thank you for your generous contribution to the San Francisco Department of Public Health (DPH). In order to help DPH comply with the San Francisco Sunshine Ordinance,* we ask that you please complete this form and return it as soon as possible to:
Department of Public Health, 101 Grove St #110, San Francisco CA 94102.

Contributor & Contribution Information:

Name: Epic Systems Corporation Date: [REDACTED]
Phone: [REDACTED] Address: [REDACTED]
Money, Goods, or Services (description): [REDACTED] Estimated Value: \$37,000

The above address is a: ☒ Business ☐ Residence

Financial Interest:

The San Francisco Sunshine Ordinance requires that a department that receives a gift of money, goods, or services worth more than \$100 in the aggregate to report any financial interest that the contributor has involving the City and County of San Francisco (the City). Please check the appropriate box or boxes that describe your financial interest in the City.

- ☒ Contract with City
☐ Grant from the City
☐ Lease of Space to or from the City
☐ City License, Permit, or Entitlement for Use
☐ Other Financial Interest
☐ Pending Financial Interest
☐ No Financial Interest

(Please describe): Epic, through its subsidiary, licenses software to the city

(Please describe): _____

(Please describe): _____

(Please describe): _____

(Please describe): _____

(Please describe): _____

*San Francisco Administrative Code Chapter 67 section 67.29-6 (Sources of Outside Funding) provides:

No official or employee or agent of the City shall accept, allow to be collected, or direct or influence the spending of, any money, or any goods or services worth more than one hundred dollars in aggregate, for the purpose of carrying out or assisting any City function unless the amount and source of all such funds is disclosed as a public record and made available on the website for the department to which the funds are directed. When such funds are provided or managed by an entity, and not an individual, that entity must agree in writing to abide by this ordinance. The

SFDPH | 101 Grove Street, Room 308, San Francisco, CA 94102



San Francisco
Department of Public Health
City and County of San Francisco
Mayor Daniel L. Lurie

disclosure shall include the names of all individuals or organizations contributing such money and a statement as to any financial interest the contributor has involving the City.

[Redacted Signature]
Signature

[Redacted Date]
Date

**Health Commission
City and County of San Francisco
Resolution No. 25-04**

**RESOLUTION TO AUTHORIZE THE DEPARTMENT OF PUBLIC HEALTH TO ACCEPT AND EXPEND GIFTS OF
\$78,696, \$110,000, \$11,949.38, \$72,000, \$10,500, \$37,000, \$110,000, and \$20,290.68 FROM THE EPIC
SYSTEMS CORPORATION**

WHEREAS, The Epic Systems Corporation provides for the distribution of seventy-eight thousand, six hundred and ninety six dollars (\$78,696), one hundred and ten thousand dollars (\$110,000), eleven-thousand, nine hundred and forty nine dollars, and thirty-eight cents (\$11,949.38), seventy-two thousand dollars (\$72,000), ten thousand five hundred dollars (\$10,500), thirty-seven thousand (\$37,000), one hundred and ten thousand dollars (\$110,000), and twenty thousand two hundred ninety dollars, and sixty-eight cents (20,290.68) to the Department of Public Health; and

WHEREAS, The Epic Safety Net Program comprises hospitals, clinics, emergency medical service treatment providers, and affiliate and contract treatment providers, all of which are under the Department of Public Health; and

WHEREAS, The Epic Systems Corporation has donated to the Department of Public Health in the amount of \$110,000, \$11,949.38, \$10,500, \$37,000, \$110,000 and \$20,290.68 for the department's role as a Safety Net provider; and

WHEREAS, The Epic Systems Corporation has donated to the Department of Public health in the amount of \$78,696 and \$72,000 for the department's role as a Federally Qualified Health Center; and

WHEREAS, The Epic Systems Corporation provides gifts to entities that help low income and at-risk populations; therefore, be it

RESOLVED, That the Health Commission authorizes the Department of Public Health to accept and expend gifts of cash of seventy-eight thousand, six hundred and ninety six dollars (\$78,696), one hundred and ten thousand dollars (\$110,000), eleven-thousand, nine hundred and forty nine dollars, and thirty-eight cents (\$11,949.38), seventy-two thousand dollars (\$72,000), ten thousand five hundred dollars (\$10,500), thirty-seven thousand (\$37,000), one hundred and ten thousand dollars (\$110,000), and twenty thousand two hundred ninety dollars, and sixty-eight cents (20,290.68) to support the goal of helping low income and at-risk populations; and be it

FURTHER RESOLVED, That the gift will be accepted and expended consistent with San Francisco Administrative Code Sections governing the acceptance of gifts to the City and County of San Francisco, including San Francisco Administrative Code Section 10.100-305.

I hereby certify that the San Francisco Health Commission at its meeting on March 3, 2025, adopted the foregoing resolution.

[Redacted Signature]

Mark Morewitz, MSW [Redacted]
Health Commission Executive Secretary

**Health Commission
City and County of San Francisco
Resolution No. 25-03**

RESOLUTION TO RECOMMEND TO THE BOARD OF SUPERVISORS TO AUTHORIZE THE DEPARTMENT OF PUBLIC HEALTH TO ACCEPT AND EXPEND A GIFT OF \$37,000 FROM THE EPIC SYSTEMS CORPORATION

WHEREAS, The Epic Systems Corporation provides for the distribution of thirty-seven thousand dollars (\$37,000) to the Department of Public Health; and



WHEREAS, The Epic Systems Corporation has donated to the Department of Public Health in the amount of \$37,000 for the department's work to support the Richmond Area Multi Services project; and

WHEREAS, The Epic Systems Corporation provides gifts to entities that help low income and at-risk populations; therefore, be it

RESOLVED, That the Health Commission recommends that the Board of Supervisor authorize the Department of Public Health to accept and expend a gift of cash of up to of thirty-seven thousand dollars (\$37,000) to support the goal of helping low income and at-risk populations; and be it

FURTHER RESOLVED, That the gift will be accepted and expended consistent with San Francisco Administrative Code Sections governing the acceptance of gifts to the City and County of San Francisco, including San Francisco Administrative Code Section 10.100-305.

I hereby certify that the San Francisco Health Commission at its meeting on March 3, 2025, adopted the foregoing resolution.


Mark Morewitz, MSW 
Health Commission Executive Secretary



City and County of San Francisco
Daniel Lurie
Mayor

San Francisco Department of Public Health

Daniel Tsai
Director of Health

Memorandum

To: Honorable Members of the Board of Supervisors

From: San Francisco Department of Public Health

Date: Thursday, May 29, 2025

RE: **Retroactivity re: Files 250544 and 250545**

This Resolution seeks authorization for the Department of Public Health (DPH) to retroactively accept and expend two in-kind gifts in the amounts of \$37,500 and \$37,000, respectively, from Epic Systems Corporation for the San Francisco Health Network.

File 250544: Accept and Expend Gift - Retroactive - Epic Systems Corporation - Community Resource Directory and Behavioral Health Project - \$37,500 – DPH received the notice of award for this gift on March 2, 2023. Following Health Commission approval, DPH then forwarded the accept and expend packet to Ethics Commission, City Attorney's Office (CAT) and Controller's Office (CON) for review, especially to ensure compliance with behested payments legislation. As a result, this gift was approved for behest exception per the regulations issued by SF Ethics Commission. Following these approvals, the Controller's Office forwarded the packet to the Mayor's Office on May 8, 2025, for introduction on May 20, 2025.

File 250545: Accept and Expend Gift - Retroactive - Epic Systems Corporation - RAMS Richmond Area Multi Services - \$37,000 - DPH received the notice of award for this gift on January 4, 2024. DPH forwarded the accept and expend packet to Ethics Commission, City Attorney's Office (CAT) and Controller's Office (CON) for review, especially to ensure compliance with behested payments legislation. As a result, this gift was approved for behest exception per the regulations issued by SF Ethics Commission. The gift was also approved by the Health Commission on March 3, 2025. Following these approvals, the Controller's Office forwarded the packet to the Mayor's Office on May 8, 2025, for introduction on May 20, 2025.

We respectfully request retroactive authorization for these items. Please contact Christina Chiong, SFDPH Accept & Expend Unit Manager, at christina.chiong@sfdph.org for any questions about this request for retroactive authorization.

City and County of San Francisco

Department of Public Health



London N. Breed
Mayor

Daniel Tsai
Director of Health

TO: Angela Calvillo, Clerk of the Board of Supervisors

FROM: Daniel Tsai
Director of Health

DATE: Wednesday, April 23, 2025

SUBJECT: Gift Accept and Expend

GIFT TITLE: RAMS Richmond Area Multi Services - \$37,000

Attached please find the original and 1 copy of each of the following:

- ☒ Proposed Gift resolution, original signed by Department
- ☒ Gift information form, including disability checklist
- ☒ Budget and Budget Justification
- ☒ Agreement / Award Letter
- ☒ Other (Explain): Check, Behest Payment Exception form, Health Resolution

Special Timeline Requirements:

Departmental representative to receive a copy of the adopted resolution:

Name: Gregory Wong

Phone: 554-2868

Interoffice Mail Address: Dept. of Public Health, Fiscal Unit, 101 Grove St #106

Certified copy required Yes ☐

No ☒

OFFICE OF THE MAYOR
SAN FRANCISCO



DANIEL LURIE
MAYOR

TO: Angela Calvillo, Clerk of the Board of Supervisors
FROM: Adam Thongsavat, Liaison to the Board of Supervisors
RE: [Accept and Expend Gift - Retroactive - Epic Systems Corporation - RAMS Richmond Area Multi Services - \$37,000]
DATE: May 20, 2025

Resolution retroactively authorizing the Department of Public Health to accept and expend a monetary gift, entitled "RAMS Richmond Multi ServicesRAMS Richmond Area Multi Services," in the amount of \$37,000 from the Epic Systems Corporation to help low income and at-risk populations for the period of July 1, 2023, through June 30, 2024.

Should you have any questions, please contact Adam Thongsavat at adam.thongsavat@sfgov.org