



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: 06-01-2022 | 22:18:03 PDT

File #: 220418

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
Kelly Hiramoto	415-255-3492
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	kelly.hiramoto@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Addiction, Research & Treatment, Inc. dba BAART	TELEPHONE NUMBER 469-912-7451
STREET ADDRESS (including City, State and Zip Code) 1720 Lakepointe Drive, Suite 117, Lewisville, TX 75057	EMAIL jmachado@baymark.com

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S) 05/24/2022	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220418
DESCRIPTION OF AMOUNT OF CONTRACT \$98,283,105		
NATURE OF THE CONTRACT (Please describe) Provide opioid dependent substance abuse treatment and education services for adult residents of San Francisco		

7. COMMENTS
Description amount changed from '\$81,767,284' to '\$98,283,105' for consistency with the Resolution and DRAFT Amendment No. 1

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	Kletter	Jason	Other Principal Officer
2	Kletter	Michelle	Other Principal Officer
3	white	David	Other Principal Officer
4	D'Andria	Gilbert	CFO
5	Baumann	Frank	COO
6	Robbins-Laurent	Nadine	Other Principal Officer
7	Groendyke	Dawn	Other Principal Officer
8	Rhodes	Jerry	Board of Directors
9	Hyde	Pamela	Board of Directors
10	Donaldson	Sam	Board of Directors
11	Miranda	Jeanne	Board of Directors
12	Klaybor	Mike	Board of Directors
13	Clarkson	Jack	Board of Directors
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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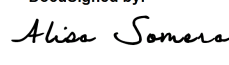
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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Check this box if you need to include additional names. Please submit a separate form with complete information. Select “Supplemental” for filing type.

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>DocuSigned by:  -977FC12A02FF42D... Alisa Somera</p>	<p>DATE SIGNED</p> <p>06-01-2022 22:18:03 PDT</p>
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