



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 #: 201137

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
DEAN GOODWIN	628-206-7675
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH DEPARTMENT OF PUBLIC HEALTH	dean.goodwin@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR UCSF/ZSFG Department of Psychiatry / Division of Subst	TELEPHONE NUMBER (415) 206-8426
STREET ADDRESS (including City, State and Zip Code) UCSF/ AHP/ MCB Box 0884 San Francisco, CA 94143-0884	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 201137
DESCRIPTION OF AMOUNT OF CONTRACT \$530,000		
NATURE OF THE CONTRACT (Please describe) Provide HIV services		

7. COMMENTS

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Oberndorf	WILLIAM	Other Principal Officer
2	Hammarskjold	PHILIP	Other Principal Officer
3	ACH	ANDREW	Board of Directors
4	BALLARD	ANDREW	Board of Directors
5	BRIGER	PETER	Board of Directors
6	CARTER	TODD	Board of Directors
7	COHEN	FRED	Board of Directors
8	CHEN	CONNIE	Board of Directors
9	DONOHOE	ROBIN R	Board of Directors
10	EMERY	DANA	Board of Directors
11	FISHER	WILLIAM S	Board of Directors
12	GANDHI	SAMEER	Board of Directors
13	GROSSMAN	BRIAN	Board of Directors
14	HAO	KENNETH	Board of Directors
15	HARTZ	JULIA	Board of Directors
16	KAWAJA	CARL	Board of Directors
17	KIMBALL	RICHARD	Board of Directors
18	MARCUS	GEORGE	Board of Directors
19	MCKNIGHT	AMY	Board of Directors

9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
20	MOMENT	JASON	Board of Directors
21	MORRIS	DIANE	Board of Directors
22	PRITZKER	LISA	Board of Directors
23	READ	STEVEN	Board of Directors
24	SCANGOS	GEORGE	Board of Directors
25	Soghikian	SHAHAN	Board of Directors
26	WEILL	JOAN	Board of Directors
27	WOEBER	ANDREW	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>
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