



San Francisco Ethics Commission

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ethics.commission@sfgov.org . www.sfethics.org

Received On: 05-05-2022 | 13:09:57 PDT

File #: 220062

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
Loren Newquist	628-652-7133
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
CHF Children, Youth and Their Families	loren.newquist@dcyf.org

5. CONTRACTOR	
NAME OF CONTRACTOR Instituto Familiar de la Raza, Inc.	TELEPHONE NUMBER 415-229-0500
STREET ADDRESS (including City, State and Zip Code) 2919 Mission Street, SF CA 94110	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S) 5/3/2022	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220062
DESCRIPTION OF AMOUNT OF CONTRACT \$11,600,000		
NATURE OF THE CONTRACT (Please describe) The Instituto Familiar de la Raza, Inc.- Roadmap to Peace Program provides coordinated services of multiple community partners engaged in the Roadmap to Peace initiative.		

7. COMMENTS
Description of Amount reflects amendment in Committee - 4/27/2022

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	Romero	Gloria	CEO
2	Ng	Benny	CFO
3	Ruiz	Santiago	Board of Directors
4	Caruso	Whitney	Board of Directors
5	Navarro	Tyrone	Board of Directors
6	Gutierrez	Kenny	Board of Directors
7	Naves	Flavia	Board of Directors
8	Castillo	Karla Lorena	Board of Directors
9	Avila	Lupe	Board of Directors
10	Gonzales-Rogers	Patrick	Board of Directors
11	Central American Resource	Center (CARCEN)	Subcontractor
12	Horizons Unlimited SF		Subcontractor
13	Mission Neighborhood	Centers Inc.	Subcontractor
14	Bay Area Community	Resources (BACR)	Subcontractor
15	Five Keys Schools and	Programs	Subcontractor
16	Mission Neighborhood	Resource Center (MNHC)	Subcontractor
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9. AFFILIATES AND SUBCONTRACTORS

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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9. AFFILIATES AND SUBCONTRACTORS

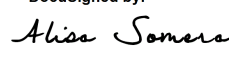
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" 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>DocuSigned by:  -977FC12A02FF42D... Alisa Somera</p>	<p>DATE SIGNED</p> <p>05-05-2022 13:09:57 PDT</p>
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