

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: 10-13-2020 | 20:15:23 PDT

File #: 200192 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. CONTRACT	TING DEPARTMENT CONTACT	
NAME OF DEP	PARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Cheryl Na	ashir	650.821.4500
FULL DEPARTM	MENT NAME	DEPARTMENT CONTACT EMAIL
AIR	Airport Commission	Cheryl.Nashir@flysfo.com

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
Canonica New York, LLC	415.619.2580
STREET ADDRESS (including City, State and Zip Code)	EMAIL
611 Wilshire Blvd, Suite 325 Los Angeles, CA 90017	Lamine.Ounnas@swisscanonica.ae

6. CC	NTRACT			
DATE	CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (If applicable)
10,	/06/2020			200192
DESC	RIPTION OF AMOUNT OF CONTRACT			L
\$28	30,000 (Minimum Annual Guarantee)			
NATU	RE OF THE CONTRACT (Please describe)			
	ternational Terminal Specialty Concession Le rket at International Terminal Boarding Area			
7. CC	DMMENTS			
	NTRACT APPROVAL			
	contract was approved by: THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM			
	THE CITE LECTIVE OFFICER(S) IDENTIFIED ON THIS FORIVI			
	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES			
	Board of Supervisors			
	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF	THE CITY ELECTIV	/E OFFICER(S) II	DENTIFIED 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.

	ract.		
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
1	Canonica	Vincent	CEO
2	Heral	Marc	CFO
3	Ounnas	Lamine	C00
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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	ТҮРЕ
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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 39 40 41 42 43 44 45 46 47 48 49 50

	Check this box if you need to include additional names. Ple Select "Supplemental" for filing type.	ease submit a separate form with complete information.	
10.	VERIFICATION		
I ha	ve used all reasonable diligence in preparing this statement	. I have reviewed this statement and to the best of my	
kno	knowledge the information I have provided here is true and complete.		
l ce	rtify under penalty of perjury under the laws of the State o	of California that the foregoing is true and correct.	
	rtify under penalty of perjury under the laws of the State on NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR	of California that the foregoing is true and correct. DATE SIGNED	
	NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR		
SIGI	NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR		
SIGI	NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR RK Docusigned by:	DATE SIGNED	
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SIGI	NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR RK Docusigned by:	DATE SIGNED	