

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: 12-15-2023 | 16:15:36 PST

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File #: 231147

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	TELEPHONE NUMBER
McKesson Plasma and Biologics, LLC	310-405-5035
STREET ADDRESS (including City, State and Zip Code)	EMAIL
6555 N State Hwy 161,Bldg A, 3rd Fl, Irving, TX 75039	Trish.Powell@McKesson.com

6 00	DNTRACT		
	CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
DAIL	CONTINUE WAS ALTHOUGH BY THE CITY ELECTIVE OF THE LINGS,	ONIGINAL DID/NIT NOMBER	231147
12	/12/2023		
DECC	DIDTION OF ANAOUNIT OF CONTRACT		
DESC	RIPTION OF AMOUNT OF CONTRACT		
No	t to exceed \$1,466,737,824		
NATU	JRE OF THE CONTRACT (Please describe)		
Pu	rchase pharmaceutical products, biologics, a	nd specialty drugs	
7. CO	DMMENTS		
0 CC	ONTRACT APPROVAL		
	contract was approved by:		
11113			
	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM		
	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 ELECTIVE OFFICER(S) I	DENTIFIED ON THIS FORM SITS
$ \sqcup $			

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	ТҮРЕ
1	Tyler	Brian S	CEO
2	Lerman	Bradley E.	Board of Directors
3	Caruso	Dominic J.	Board of Directors
4	Knauss	Donald R.	Board of Directors
5	Salka	Susan R.	Board of Directors
6	Carmona	Richard H.	Board of Directors
7	Dunbar	W. Roy	Board of Directors
8	Hinton	James H.	Board of Directors
9	Mantia	Linda P.	Board of Directors
10	Martinez	Maria	Board of Directors
11	wilson-Thompson	Kathleen	Board of Directors
12	Schechter	Lori	Other Principal Officer
13	Vitalone	Britt	CFO
14	Avila	Nancy	Other Principal Officer
15	Smith	LeAnn	Other Principal Officer
16	Rodgers	Thomas	Other Principal Officer
17	Jhaveri	Nimesh	Other Principal Officer
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	contract.			
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ	
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Select "Supplemental" for f	iling type.	·	
10. VERIFICATION			
I have used all reasonable diliger	nce in preparing this statement.	I have reviewed this statement and to the best of my	
knowledge the information I have	e provided here is true and com	nplete.	
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.			
SIGNATURE OF CITY ELECTIVE OFFICE	ER OR BOARD SECRETARY OR	DATE SIGNED	
DocuSigned by: 988C8F42C3084B5 Angela Calvillo		12-15-2023 16:15:36 PST	