

File No. 251227

Committee Item No. 11

Board Item No. 10

## COMMITTEE/BOARD OF SUPERVISORS

### AGENDA PACKET CONTENTS LIST

Committee: Budget and Finance Committee Date January 14, 2026

Board of Supervisors Meeting Date January 27, 2026

#### Cmte Board

- |                                     |                                     |  |
|-------------------------------------|-------------------------------------|--|
| <input type="checkbox"/>            | <input type="checkbox"/>            | Motion                                       |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Resolution                                   |
| <input type="checkbox"/>            | <input type="checkbox"/>            | Ordinance                                    |
| <input type="checkbox"/>            | <input type="checkbox"/>            | Legislative Digest                           |
| <input type="checkbox"/>            | <input type="checkbox"/>            | Budget and Legislative Analyst Report        |
| <input type="checkbox"/>            | <input type="checkbox"/>            | Youth Commission Report                      |
| <input type="checkbox"/>            | <input type="checkbox"/>            | Introduction Form                            |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Department/Agency Cover Letter and/or Report |
|                                     |                                     | • DPH Memo 10/24/2025                        |
|                                     |                                     | • MYR Memo 12/2/2025                         |
| <input type="checkbox"/>            | <input type="checkbox"/>            | MOU  |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Grant Information Form                       |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Budget Justification                         |
| <input type="checkbox"/>            | <input type="checkbox"/>            | Subcontract Budget                           |
| <input type="checkbox"/>            | <input type="checkbox"/>            | Contract/Agreement                           |
| <input type="checkbox"/>            | <input type="checkbox"/>            | Form 126 – Ethics Commission                 |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Gift Acknowledgement Letter                  |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Application                                  |
| <input type="checkbox"/>            | <input type="checkbox"/>            | Public Correspondence                        |

#### OTHER (Use back side if additional space is needed)

- |                                     |                                     |  |
|-------------------------------------|-------------------------------------|--|
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <u>DPH Gift Questionnaire 7/21/2025</u>                |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <u>Health Commission Resolution No. 25-09 8/4/2025</u> |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <u>Test Kits Received</u>                              |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <u>State Donations</u>                                 |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <u>DPH Memo on Retroactivity 1/8/2026</u>              |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <u>DPH Presentation 1/14/2026</u>                      |
| <input type="checkbox"/>            | <input type="checkbox"/>            | <u> </u>   |
|                                     |                                     | <u> </u>   |

Completed by: Brent Jalipa Date January 8, 2026

Completed by: Brent Jalipa Date January 22, 2026

1 [Accept and Expend In-Kind Gift - Retroactive - Administration for Strategic Preparedness and  
2 Response - California Department of Public Health - COVID-19 Test Kits - \$527,664 -  
3 FY2024-2025]

4 **Resolution retroactively authorizing the Department of Public Health to accept and**  
5 **expend an in-kind gift of COVID-19 test kits in the total amount of \$527,664 for Fiscal**  
6 **Year (FY) 2024-2025, from the Administration for Strategic Preparedness and Response**  
7 **through the California Department of Public Health in support of the Department of**  
8 **Public Health clinic patients and staff.**

9  
10 WHEREAS, The Administration for Strategic Preparedness and Response (ASPR),  
11 through the California Department of Public Health (CDPH), has agreed to donate to the  
12 Department of Public Health (DPH) an in-kind gift of COVID-19 Test Kits (COVID) valued in  
13 the total amount of \$527,664 in support of patients and clinical staff of the Department of  
14 Public Health; and

15 WHEREAS, CDPH had gifted test kits throughout the period of July 1, 2024, through  
16 June 30, 2025, and the test kits were delivered and installed for DPH's use during that period;  
17 and

18 WHEREAS, The accept and expend was not done timely; and

19 WHEREAS, Annual reporting to the Board of Supervisors was not made per San  
20 Francisco Administrative Code, Section 10.100-305; now, therefore, be it

21 RESOLVED, That the Board of Supervisors approves the in-kind gift, and authorizes  
22 DPH to accept and expend an in-kind gift of the COVID-19 Test Kits valued in the total  
23 amount of \$527,664 donated by ASPR through CDPH; and, be it

24 FURTHER RESOLVED, That the proceeds of the in-kind gift by ASPR through CDPH  
25 will be accepted and expended consistent with the San Francisco Administrative Code

1 sections governing the acceptance of gifts to the City and County of San Francisco, including  
2 the San Francisco Administrative Code, Section 10.100-201; and, be it

3 FURTHER RESOLVED, That the Board of Supervisors extends its gratitude to ASPR  
4 for the generous in-kind gift to the City and County of San Francisco in support of DPH.

1 Recommended: Approved: \_\_\_\_\_ /s/ \_\_\_\_\_  
2 Mayor  
3 \_\_\_\_\_ /s/ \_\_\_\_\_  
4 Daniel Tsai Approved: \_\_\_\_\_ /s/ \_\_\_\_\_  
5 Director of Health Controller  
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**File Number:** 251227  
(Provided by Clerk of Board of Supervisors)

**Gift Resolution Information Form**  
(Effective July 2011)

Purpose: Accompanies proposed Board of Supervisors resolutions authorizing a Department to accept and expend gift funds.

The following describes the gift referred to in the accompanying resolution:

1. Gift Title: **COVID-19 Test Kits - FY2024-2025**
2. Department: **Department of Public Health**
3. Contact Person: **Solomon Gebala** Telephone: **628.217.6171**
4. Gift Approval Status (check one):  
☒ Approved by funding agency ☐ Not yet approved
5. Amount of Gift Funding Approved or Applied for: **\$527,664**
- 6a. Matching Funds Required: **\$0**  
b. Source(s) of matching funds (if applicable): **N.A.**
- 7a. Gift Source Agency: **Administration for Strategic Preparedness and Response**  
b. Gift Pass-Through Agency (if applicable): **California Department of Public Health**
8. Proposed Gift Project Summary:

**Donations of COVID-19 Test Kits by the Administration for Strategic Preparedness and Response through the California Department of Public Health to the San Francisco Department of Public Health.**

9. Gift Project Schedule, as allowed in approval documents, or as proposed:

Start-Date: **July 1, 2024**

End-Date: **June 30, 2025**

- 10a. Amount budgeted for contractual services: **\$0**  
b. Will contractual services be put out to bid? **N.A.**  
c. If so, will contract services help to further the goals of the Department's Local Business Enterprise (LBE) requirements? **N.A.**  
d. Is this likely to be a one-time or ongoing request for contracting out? **N.A.**
- 11a. Does the budget include indirect costs? ☐ Yes ☒ No  
b1. If yes, how much? **\$0**  
b2. How was the amount calculated? **N.A.**  
c1. If no, why are indirect costs not included?  
☐ Not allowed by granting agency ☒ To maximize use of gift funds on direct services

☐ Other (please explain):

c2. If no indirect costs are included, what would have been the indirect costs? **5% of Direct Costs**

12. Any other significant gift requirements or comments:

**The gift does not require an ASO amendment and does not create net new positions.**

**We respectfully request for approval to accept and expend these gifts retroactive to July 1, 2024. The Department received the in-kind gifts throughout the period of July 1, 2024, through June 30, 2025.**

Project Description:

Project ID:

Proposal ID:

Fund ID:

Version ID:

Authority ID:

Activity ID:

**\*\*Disability Access Checklist\*\* (Department must forward a copy of all completed Gift Information Forms to the Mayor's Office of Disability)**

13. This Gift is intended for activities at (check all that apply):

- |  |   |  |
|--|---|--|
| <input checked="" type="checkbox"/> Existing Site(s) | <input type="checkbox"/> Existing Structure(s)      | <input type="checkbox"/> Existing Program(s) or Service(s) |
| <input type="checkbox"/> Rehabilitated Site(s)       | <input type="checkbox"/> Rehabilitated Structure(s) | <input type="checkbox"/> New Program(s) or Service(s)      |
| <input type="checkbox"/> New Site(s)                 | <input type="checkbox"/> New Structure(s)           |  |

14. The Departmental ADA Coordinator or the Mayor's Office on Disability have reviewed the proposal and concluded that the project as proposed will be in compliance with the Americans with Disabilities Act and all other Federal, State and local disability rights laws and regulations and will allow the full inclusion of persons with disabilities. These requirements include, but are not limited to:

1. Having staff trained in how to provide reasonable modifications in policies, practices and procedures;
2. Having auxiliary aids and services available in a timely manner in order to ensure communication access;
3. Ensuring that any service areas and related facilities open to the public are architecturally accessible and have been inspected and approved by the DPW Access Compliance Officer or the Mayor's Office on Disability Compliance Officers.

If such access would be technically infeasible, this is described in the comments section below:

Comments:

Departmental ADA Coordinator or Mayor's Office of Disability Reviewer:

Toni Rucker, PhD  
(Name)

DPH ADA Coordinator  
(Title)

Date Reviewed: 10/13/2025 | 2:19 PM PDT

DocuSigned by:  
Toni Rucker  
(Signature Required)

**Department Head or Designee Approval of Gift Information Form:**

Daniel Tsai  
(Name)

Director of Health  
(Title)

Date Reviewed: 11/3/2025 | 8:46 AM PST

Signed by:  
Jenny Louie for Daniel Tsai  
40CFE25DD8B4464...



## **File 251227: Gift Accept & Expend**

# **Administration for Strategic Preparedness and Response - California Department of Public Health: COVID-19 Test Kits**

**BOS Budget & Finance Committee**

January 14, 2026

**Solomon Gebala, IT Procurement Director, San Francisco Health Network**

**SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH**



# Overview of Gift



## Administration for Strategic Preparedness and Response - California Department of Public Health - COVID-19 Test Kits:

- **Amount:** \$527,664
- **Timeline:** July 1, 2024 - June 30, 2025, Fiscal Year (FY) 24-25
- **Donor:** Administration for Strategic Preparedness and Response (ASPR), through California Department of Public Health (CDPH)
- **Gift Summary:**
  - CDPH gifted COVID-19 Test Kits throughout the 24-25 fiscal year.
  - DPH distributed the test kits across the SF Health Network and the San Francisco community.

# Retroactivity



We are seeking **retroactive authorization** to accept and expend this gift.

- This gift is retroactive because the accept and expend was not done in a timely manner due to delays with both the Health Commission and City approvals process.
- DPH brought this item as quickly as possible to the BOS after receiving fiscal approval, including Controller's Office review and approval.



# Conclusion

**DPH respectfully requests approval of this item.  
Thank you!**

San Francisco Department of Public Health (SFPDH)  
COVID-19 Test Kits - FY2024-2025

**BUDGET JUSTIFICATION**  
July 1, 2024 to June 30, 2025

<b>A.</b>	<b>PERSONNEL</b>	
<b>B.</b>	<b>MANDATORY FRINGE</b>	
	<b>TOTAL PERSONNEL:</b>	<b>\$0</b>
<b>C.</b>	<b>TRAVEL</b>	<b>\$0</b>
<b>D.</b>	<b>EQUIPMENT</b>	<b>\$0</b>
<b>E.</b>	<b>SUPPLIES</b>	<b>\$527,664</b>
<b>F.</b>	<b>CONTRACTUAL</b>	<b>\$0</b>
<b>G.</b>	<b>OTHER</b>	<b>\$0</b>
	<b>TOTAL DIRECT COSTS</b>	<b>\$527,664</b>
<b>H.</b>	<b>INDIRECT COSTS</b>	<b>\$0</b>
	<b>TOTAL BUDGET:</b>	<b>\$527,664</b>



**San Francisco**  
**Department of Public Health**  
 City and County of San Francisco  
 Mayor Daniel L. Lurie



Monday, July 21, 2025

**California Department of Public Health**  
**Office of Infectious Disease Preparedness and Response**  
**Medical Countermeasure Unit**

Dear Ms. Marchand:

Thank you for your generous contribution to the San Francisco Department of Public Health (DPH). In order to help DPH comply with the San Francisco Sunshine Ordinance,\* we ask that you please complete this form and return it as soon as possible to: Department of Public Health, 101 Grove St #110, San Francisco CA 94102.

Contributor & Contribution Information:

Name: Chloe Le Marchand, Medical Countermeasure Strategy Lead with CID Date: 07/21/25

Phone: 626-436-4456 Address: 850 Marina Bay Pkwy, Richmond CA 94804

Money, Goods, or Services (description): COVID-19 Test Kits (Various brands and pack size) – 87,944 each

Estimated Value: \$527,664

The above address is a: ☒ Business ☐ Residence

Financial Interest:

The San Francisco Sunshine Ordinance requires that a department that receives a gift of money, goods, or services worth more than \$100 in the aggregate to report any financial interest that the contributor has involving the City and County of San Francisco (the City). Please check the appropriate box or boxes that describe your financial interest in the City.

<input type="checkbox"/> Contract with City	(Please describe): _____
<input type="checkbox"/> Grant from the City	(Please describe): _____
<input type="checkbox"/> Lease of Space to or from the City	(Please describe): _____
<input type="checkbox"/> City License, Permit, or Entitlement for Use	(Please describe): _____
<input type="checkbox"/> Other Financial Interest	(Please describe): _____
<input type="checkbox"/> Pending Financial Interest	(Please describe): _____
<input checked="" type="checkbox"/> No Financial Interest	

\*San Francisco Administrative Code Chapter 67 section 67.29-6 (Sources of Outside Funding) provides:

No official or employee or agent of the City shall accept, allow to be collected, or direct or influence the spending of, any money, or any goods or services worth more than one hundred dollars in aggregate, for the purpose of carrying out or assisting any City function unless the amount and source of all such funds is disclosed as a public record and made available on the website for the department to which the funds are directed. When such funds are provided or managed by an entity, and not an individual, that entity must agree in writing to abide by this ordinance. The disclosure shall include the names of all individuals or organizations contributing such money and a statement as to any financial interest the contributor has involving the City.

Signature

7/21/25

Date

1145 Market Street, San Francisco, CA 94103



**San Francisco  
Department of Public Health**

City and County of San Francisco  
Mayor Daniel L. Lurie

Thursday, July 31, 2025

California Department of Public Health  
Office of Infectious Disease Preparedness and Response  
Medical Countermeasure Unit

Dear Chloe Le Marchand,

Thank you for your contribution of COVID-19 Test Kits received on July 21, 2025. Please keep this written acknowledgement of your gift to the City for your tax records.

Description of Donated Property:

(It is the responsibility of the donor to estimate the fair market value of donated items)

Description of Donated property	Quantity	Cash Value	Financial Interest
COVID-19 Test Kits	87944	\$527,664	None

No goods or services were provided by the City in connection with the gift.

Thank you for your support!

Very truly yours,

DocuSigned by:  
*Naveena Bobba*  
528C36E45C89438

Daniel Tsai  
Director of Health  
Department of Public Health  
San Francisco CA 94102  
Naveena Bobba, Deputy Director for Daniel Tsai

**Health Commission  
City and County of San Francisco  
Resolution No. 25-09**

**RESOLUTION TO RECOMMEND TO THE BOARD OF SUPERVISORS TO AUTHORIZE THE DEPARTMENT OF  
PUBLIC HEALTH TO ACCEPT AND EXPEND GIFTS OF \$527,664 FROM THE CALIFORNIA DEPARTMENT OF  
PUBLIC HEALTH**

WHEREAS, The California Department of Public Health provides for the distribution of Coronavirus disease 2019 (COVID-19) test kits valued in the amount of five hundred twenty-seven thousand six hundred sixty-four (\$527,644) to the Department of Public Health; and

WHEREAS, The California Department of Public Health provides donations to entities that help low income and at-risk populations; therefore, be it

RESOLVED, That the Health Commission recommends that the Board of Supervisor authorize the Department of Public Health accept and expend gifts of COVID-19 test kits valued in the amount of five hundred twenty-seven thousand six hundred sixty-four (\$527,644) to support the goal of helping low income and at-risk populations; and be it

FURTHER RESOLVED, That the gift will be accepted and expended consistent with San Francisco Administrative Code Sections governing the acceptance of gifts to the City and County of San Francisco, including San Francisco Administrative Code Section 10.100-201.

I hereby certify that the San Francisco Health Commission at its meeting on August 4, 2025, adopted the foregoing resolution.



Mark Morewitz, MSW  
Health Commission Executive Secretary

F\$P Item #	Description	Qty	Ave. Price
CA1000135	OHC Covid-19 AST (2 pk)	4800	
CA1000136	OHC Covid-19 AST (2 pk)	4800	
CA1000135	OHC Covid-19 AST (2 pk)	2450	
Ca1000137	Carestart AHT (2 pk)	2436	
CA1000136	OHC Covid-19 AST (2 pk)	2450	
CA1000137	Carestart AHT (2 pk)	2436	
CA1000137	Carestart AHT (2 pk)	3774	
CA1000137	Carestart AHT (2 pk)	2726	
CA1000137	Carestart AHT (2 pk)	4408	
CA1000137	Carestart AHT (2 pk)	4246	
CA1000135	OHC Covid-19 AST (2 pk)	2200	
CA1000135	OHC Covid-19 AST (2 pk)	2500	
CA1000135	OHC Covid-19 AST (2 pk)	2450	
CA1000135	OHC Covid-19 AST (2 pk)	2150	
CA1000135	OHC Covid-19 AST (2 pk)	2100	
CA1000135	OHC Covid-19 AST (2 pk)	2600	
CA1000135	OHC Covid-19 AST (2 pk)	2150	
CA1000135	OHC Covid-19 AST (2 pk)	2450	
CA1000135	OHC Covid-19 AST (2 pk)	1950	
CA1000135	OHC Covid-19 AST (2 pk)	350	
CA1000135	OHC Covid-19 AST (2 pk)	600	
CA1000133	InteliSwab OTC (2 pk)	2064	
CA1000133	InteliSwab OTC (2 pk)	336	
CA1000138	Inbios Scov-2 STK	2160	
CA1000139	iHealth Covid-19 ART (5 pk)	3780	
CA1000139	iHealth Covid-19 ART (5 pk)	540	
CA1000133	InteliSwab OTC (2 pk)	2160	
CA1000135	OHC Covid-19 AST (2 pk)	786	
CA1000139	iHealth Covid-19 ART (5 pk)	135	
CA1000140	InteliSwab OTC (2 pk)	2400	
CA1000140	iHealth Covid-19 ART (5 pk)	1872	
CA1000141	CorDx Covid-19AHT	300	
CA1000142	Pilot Covid-19 AHT (4 pk)	2016	
CA1000138	Inbios Scov-2 STK	1920	
CA1000142	Pilot Covid-19 AHT (4 pk)	144	
CA1000138	Inbios Scov-2 STK	2496	
CA1000142	Pilot Covid-19 AHT (4 pk)	288	
CA1000142	Pilot Covid-19 AHT (4 pk)	144	
CA1000139	iHealth Covid-19 ART (5 pk)	2160	
CA1000133	InteliSwab OTC (2 pk)	144	
CA1000143	MaximBio Covid-19 AHT (2 pk)	2272	
CA1000133	InteliSwab OTC (2 pk)	288	
CA1000140	Advin Covid-19 AHT (2 pk)	1152	



CA1000141	CorDx Covid-19AHT	150
CA1000138	Inbios Scov-2 STK	144
CA1000139	iHealth Covid-19 ART (5 pk)	405
CA1000141	CorDx Covid-19AHT	300
CA1000137	Carestart AHT (2 pk)	348
CA1000144	GenBody covid-19 AHT (2 pk)	144
CA1000144	GenBody covid-19 AHT (2 pk)	144
CA1000144	GenBody covid-19 AHT (2 pk)	144
CA1000145	Lifesign Covid-19 Rapid Test (2 pack)	432
CA1000141	CorDx Covid-19AHT	150

87944 \$ 6.00 \$ 527,664.00

# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Daisy Aquallo, David Lawlor and DPH Logs Chief  
 Contact Phone:   
 Contact Email: DPH-DOC Logs Resource < >

Order Number

Beginning Summary Date

End Summary Date

Time of Pickup

7/9/2024

DPH will deliver to 375 Laguna Honda Blvd, Loading Dock

Itemize Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	OHC Covid-19 Antigen Self Test (2 pk)	4,800	CA1000135	4,800	\$0.0000	PNDMC-A	

RCV  
0000777

Print Name of Person Who Picked Up Supplies: Kelly

DSW # 7-34-24

Signature of Person Who Picked Up Supplies: \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_



# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Daisy Aguallo, David Lawlor and DPH Logs Chief  
 Contact Phone:   
 Contact Email: DPH-DOC Logs Resource

Order Number

Beginning Summary Date  
 End Summary Date  
 Time of Pickup

7/9/2024

DPH will deliver to 375 Laguna Honda Blvd, Loading Dock

Itemize Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

RCV0000

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	OHC Covid-19 Antigen Self Test (2 pk) 135	4,800	CA1000136	4,800	\$0.0000	PNDMC-A	818

Print Name of Person Who Picked Up Supplies: \_\_\_\_\_ DSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies: \_\_\_\_\_ Date \_\_\_\_\_

Time \_\_\_\_\_



# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Daisy Aguillo, David Lawlor and DPH Logs Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH-DOC Logs Resource [REDACTED]

Order Number

Beginning Summary Date  
 End Summary Date  
 Time of Pickup

7/23/2024

DPH will deliver to 375 Laguna Honda Blvd, Loading Dock

Itemize Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	DMC Covid 19 Antigen Self Test (2 pk)	2,450	CA1000135	2,450	\$0.0000	PNDMC-A	
EA	Test Kit Carestart Antigen Home (2pk)	2,436	CA1000137	2,436	\$0.0000	PNDMC-A	

RCW  
 0000775  
 0000776

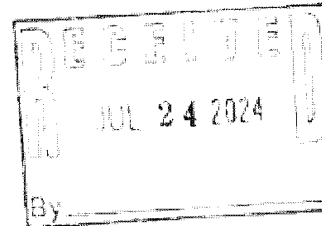
Print Name of Person Who Picked Up Supplies Kelly

DSW # 7-24-24

Signature of Person Who Picked Up Supplies \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_



# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Daisy Aguillo, David Lawlor and DPH Logs Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH-DOC Logs Resource [REDACTED]

Order Number

Beginning Summary Date  
 End Summary Date  
 Time of Pickup

7/23/2024

DPH will deliver to 375 Laguna Honda Blvd, Loading Dock

Itemize Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

RCV0000

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	OHC Covid-19 Antigen Self Test (2 pk) 135	2,450	CA1000136	2,450	\$0.0000	PNDMC-A	819
EA	Test Kit Carestart Antigen Home (2pk) 137	2,436	CA1000137	2,436	\$0.0000	PNDMC-A	820

Print Name of Person Who Picked Up Supplies: \_\_\_\_\_ DSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies: \_\_\_\_\_ Date \_\_\_\_\_

Time \_\_\_\_\_



# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Daisy Aguillo, David Lawlor and DPH Logistics Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH-DOC Logistics Resource [REDACTED]

Order Number

Beginning Summary Date  
 End Summary Date  
 Time of Pickup

8/5/2024

DPH will deliver to 375 Laguna Honda Blvd, Loading Dock  
 Itemize Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

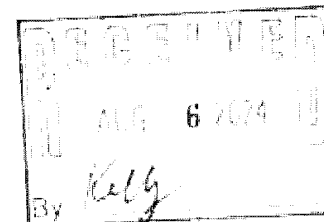
Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	Test Kit Carestart Antigen Home (2pk)	3,774	CA1000137	3,774	\$0.0000	PNDMC-A	

REV 0010  
178

Print Name of Person Who Picked Up Supplies \_\_\_\_\_ DSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies \_\_\_\_\_ Date \_\_\_\_\_

Time \_\_\_\_\_



# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Dany Aguillo, David Lawlor and DPH Logs Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH-DOC Logs Resource [REDACTED]

Order Number

Beginning Summary Date

End Summary Date

Time of Pickup

8/15/2024

DPH will deliver to 375 Laguna Honda Blvd. Loading Dock  
 Itemize Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

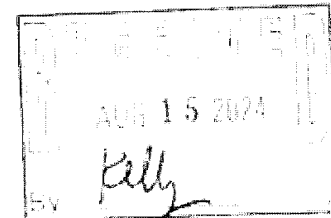
RCV0000  
779

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	Test Kit Carestart Antigen Home (2pk)	2.726	CA1000137	2.726	\$0.0000	PNDMC-A	

Print Name of Person Who Picked Up Supplies \_\_\_\_\_ DSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies \_\_\_\_\_ Date \_\_\_\_\_

Time \_\_\_\_\_



# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Daisy Aguillo, David Lawlor and DPH Logs Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH-DOC Logs Resource [REDACTED]

Order Number

Beginning Summary Date  
 End Summary Date  
 Time of Pickup

9/3/2024

DPH will deliver to 375 Laguna Honda Blvd, Loading Dock

Itemize Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

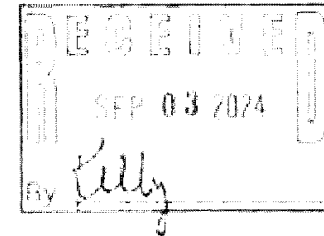
Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	Test Kit Carestart Antigen Home (2pk)	4,408	CA1000137	4,408	\$0.0000	PNDMC-A	

Print Name of Person Who Picked Up Supplies \_\_\_\_\_ DSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies \_\_\_\_\_ Date \_\_\_\_\_

Time \_\_\_\_\_

Receipt No RCV0000780





# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Daisy Aguilar, David Lawler and DPH Logistics Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH-LOGS-RECEIPT@ [REDACTED]

Order Number

Beginning Summary Date

End Summary Date

Time of Pickup

9/6/2024

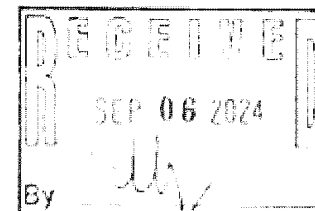
DPH will deliver to 375 Laguna Honda Blvd, Loading Dock  
 Itemize Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	Test Kit Curevart Antigen Home (J&J)	4,246	CA1000137	4,246	\$0.0000	PNDMC-A	

Print Name of Person Who Picked Up Supplies: \_\_\_\_\_ DSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_



Receipt # RCV0000782

# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Daisy Aguilar, David Lawlor and DPH Logistics Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH-DOH Logistics Resource [REDACTED]

Order Number

Beginning Summary Date

End Summary Date

Time of Pickup

9/13/2024

DPH will deliver to 375 Laguna Honda Blvd, Loading Dock  
 Itemize Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

Rept # RCV  
 0000783

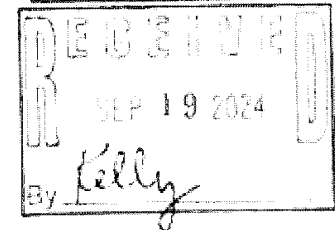
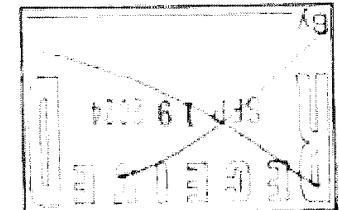
Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	DPH Covid-19 Antigen Self Test Kit	2,200	CA1000135	2,200	\$0.0000	PNDMC-A	

Print Name of Person Who Picked Up Supplies \_\_\_\_\_ DSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies \_\_\_\_\_ Date \_\_\_\_\_

Time \_\_\_\_\_

SENT TO DW  
 9-13-24  
 JUST REND  
 9-19-24



# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Daisy Aguilar, David Lawler and DPH Logistics Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH-DOC Logistics Resource [REDACTED]

Order Number

Beginning Summary Date  
 End Summary Date  
 Time of Pickup

9/20/2024

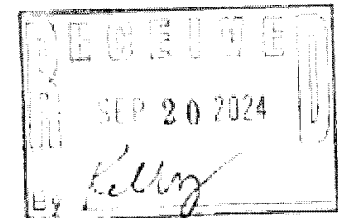
DPH will deliver to 375 Laguna Honda Blvd. Loading Dock  
 Itemize Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	ONE Covid 19 Antigen Self Test Kit	2,500	CA1000135	2,500	\$0.0000	PNDMC-A	

Print Name of Person Who Picked Up Supplies \_\_\_\_\_ OSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_



Receipt No RCV0000784

# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Daisy Aguillo, David Lawlor and DPH Logs Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH-DGC Logs Resource [REDACTED]

Order Number

Beginning Summary Date  
 End Summary Date  
 Time of Pickup

9/20/2024

DPH will deliver to 375 Laguna Honda Blvd, Loading Dock  
 Itemize Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

REV 0000785

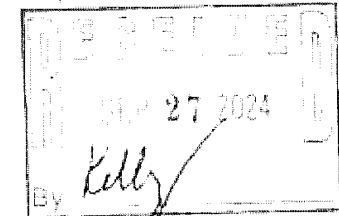
Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	OHC Covid-19 Antigen Self Test Kit	2,450	CA1000135	2,450	\$0.0000	PNDMC-A	

Print Name of Person Who Picked Up Supplies \_\_\_\_\_ DSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies \_\_\_\_\_ Date \_\_\_\_\_

Time \_\_\_\_\_

Receipt No REV 0000785



# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Daisy Aguillo, David Lawlor and DPH Logistics Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH-DOC Logistics Resource [REDACTED]

Order Number

Beginning Summary Date  
 End Summary Date  
 Time of Pickup

10/4/2024

DPH will deliver to 375 Laguna Honda Blvd, Loading Dock

Itemize Materials and Supplies for Pickup by the Department

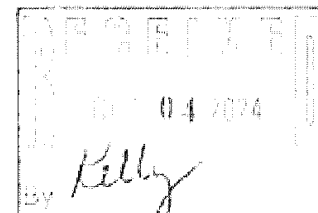
## PSFT Inventory Transactions

Receipt No RCV0000786

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	OHC Covid-19 Antigen Self Test Kit	2,150	CA1000135	2,150	\$0.0000	PNDMC-A	

Print Name of Person Who Picked Up Supplies: \_\_\_\_\_ DSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies: \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_



Receipt No RCV0000786

# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Daisy Aguirre, David Lawlor and DPH Logistics Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH-DOC Logistics Resource [REDACTED]

Order Number

Beginning Summary Date

End Summary Date

Time of Pickup

10/11/2024

DPH will deliver to 375 Laguna Honda Blvd, Loading Dock  
 Itemize Materials and Supplies for Pickup by the Department

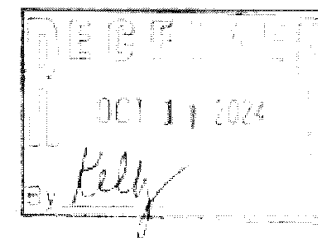
## PSFT Inventory Transactions

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	DPH Covid-19 Antigen Self Test Kit	2,100	CA1000135	2,100	\$0.0000	PNDMC-A	

*Receipt NO REC  
000787*

Print Name of Person Who Picked Up Supplies \_\_\_\_\_ DSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_



# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Gaby Aguillo, David Lawlor and DPH Logistics Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH-DOC Logistics Resource [REDACTED]

Order Number

Beginning Summary Date  
 End Summary Date  
 Time of Pickup

10/18/2024

DPH will deliver to 375 Laguna Honda Blvd. Loading Dock

Itemize Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

REV 0000  
738

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	One COVID-19 Antigen Self Test Kit	2,600	CA1000135	2,600	\$0.0000	PNDMC-A	

Print Name of Person Who Picked Up Supplies: \_\_\_\_\_ DSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies: \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

RECEIVED  
 OCT 18 2024  
 BY Kelly

# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Daisy Aguillo David Lawler and DPH Logistics Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH-GOC Logistics Resource [REDACTED]

Order Number

Beginning Summary Date  
 End Summary Date  
 Time of Pickup

10/25/2024

DPH will deliver to 375 Laguna Honda Blvd, Loading Dock

Itemize Materials and Supplies for Pickup by the Department

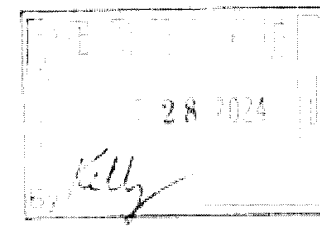
## PSFT Inventory Transactions

KCLV0000  
789

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	One Covid 19 Antigen Self Test Kit	2,150	CA1000135	2,150	\$0.0000	PNOMC-A	

Print Name of Person Who Picked Up Supplies \_\_\_\_\_ DSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_





# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Mary Aguillo, David Fowler and DPH Logistics Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH.DOC.Logs.Responses@sf.gov

Order Number

Beginning Summary Date  
 End Summary Date  
 Time of Pickup

11/1/2024

DPH will deliver to 375 Laguna Honda Blvd, Loading Dock  
 Itemize Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	GHC Covid 19 Antigen Self Test Kit	2,450	CA1000135	2,450	\$0.0000	PNDMC-A	

RCV0000  
790

Print Name of Person Who Picked Up Supplies \_\_\_\_\_ DSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

NOV 01 2024  
 By Kelly

# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Daisy Aguillo, David Lawlor and DPH Logs Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH-DOG Logs Resource [REDACTED]

Order Number

Beginning Summary Date

End Summary Date

Time of Pickup

11/8/2024

DPH will deliver to 375 Laguna Honda Blvd, Loading Dock

Itemize Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

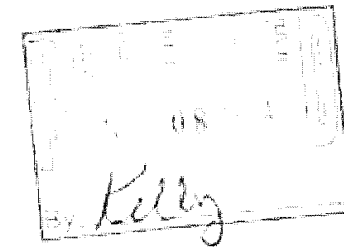
Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	OHC Covid 19 Antigen Self Test Kit	1,950	CA1000135	1,950	\$0.0000	PNDMC-A	

Print Name of Person Who Picked Up Supplies \_\_\_\_\_ DSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies \_\_\_\_\_ Date \_\_\_\_\_

Time \_\_\_\_\_

Receipt NO  
RCV0000791



# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Daisy Aguilar, David Lawler and DPH Logistics Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH-DOC Logistics Resource [REDACTED]

Order Number

Beginning Summary Date  
 End Summary Date  
 Time of Pickup

11/15/2024

DPH will deliver to 375 Laguna Honda Blvd. Loading Dock  
 Itemize Materials and Supplies for Pickup by the Department

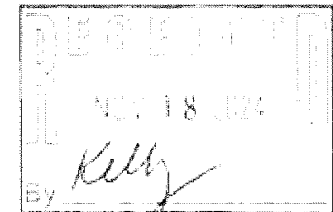
## PSFT Inventory Transactions

Receipt No RCC  
 0000793

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	ONE Covid-19 Antigen Self Test kit	350	CA1000135	350	\$0.0000	PNDMC-A	

Print Name of Person Who Picked Up Supplies \_\_\_\_\_ DSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_



# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Daisy Aguilar, David Lawlor and DPH Logistics Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH-LOG Logistics Resource [REDACTED]

Order Number

Beginning Summary Date  
 End Summary Date  
 Time of Pickup

11/22/2024

DPH will deliver to 375 Laguna Honda Blvd. Loading Dock  
 Itemize Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	QHC Covid-19 Antigen Rapid Test Kit	600	CA1000135	600	\$0.0000	PNDMC-A	0300793
EA	Intel Swab QTC Test Kit (2 pack)	2,064	CA1000133	2,064	\$0.0000	PNDMC-A	0300794

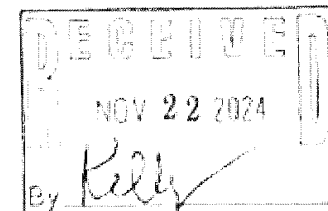
Print Name of Person Who Picked Up Supplies

OSW #

Signature of Person Who Picked Up Supplies

Date

Time



# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Daisy Aguilar, David Lawler and DPH Logistics Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH-DOCC Logistics Resource [REDACTED]

Order Number

Beginning Summary Date

End Summary Date

Time of Pickup

12/6/2024

DPH will deliver to 375 Laguna Honda Blvd, Loading Dock  
 Remove Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	IntelSwab OTC Test Kit (2 pack)	336	CA1000133	336	\$0.0000	PNDMC-A	REV000 795
EA	IntelSwab Spec 2 Afs Detect Self Test Kit (each 10)	2,160	CA1000138	2,160	\$0.0000	PNDMC-A	REV000 796

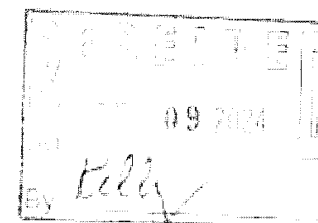
Print Name of Person Who Picked Up Supplies

DSW #

Signature of Person Who Picked Up Supplies

Date

Time



# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Daisy Aguilar, David Lawlor and DPH Logistics Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH.DOC.Logistics@sf.gov [REDACTED]

Order Number

Beginning Summary Date  
 End Summary Date  
 Time of Pickup

12/16/2024

DPH will deliver to 375 Laguna Honda Blvd. Loading Dock  
 Itemize Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

Receipt NO  
 RCV0000797

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	Health COVID-19 Antigen Rapid Test (5 per box)	3,780	CA1000139	3,780	\$0.0000	PNDMC-A	

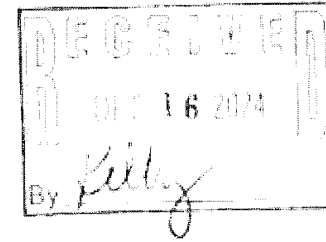
Print Name of Person Who Picked Up Supplies

DSW #

Signature of Person Who Picked Up Supplies

Date

Time



# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Daisy Aguilar, David Lawler and DPH Logistics Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH.DOC.Log.Resource [REDACTED]

Order Number

Beginning Summary Date

12/20/2024

End Summary Date

Time of Pickup

DPH will deliver to 375 Laguna Honda Blvd, Loading Dock  
 Itemize Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

REV

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	Hydith COVID-19 Antigen Rapid Test (1 per box)	540	CA1000139	540	\$0.0000	PNDMC-A	0000 778
EA	IntelliSwab Q1c Test Kit (2 per kit)	2,160	CA1000133	2,160	\$0.0000	PNDMC-A	0000 799
EA	QHC Covid-19 Antigen Self Test Kit	786	CA1000135	786	\$0.0000	PNDMC-A	0000 800

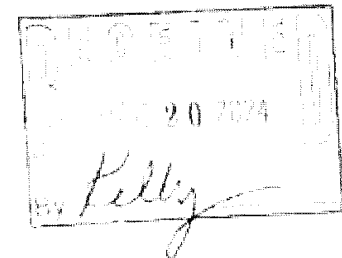
Print Name of Person Who Picked Up Supplies

DSW #

Signature of Person Who Picked Up Supplies

Date

Time



# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Dany Aquillo, David Lawlor and DPH Logistics Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH-DCS Logistics Resource [REDACTED]

Order Number

Beginning Summary Date

1/3/2025

End Summary Date

Time of Pickup

DPH will deliver to 375 Laguna Honda Blvd, Loading Dock  
 Itemize Materials and Supplies for Pickup by the Department:

## PSFT Inventory Transactions

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	Health (COVID-19 Antigen Rapid Test (5 per box)	135	CA1000139	135	\$0.0000	PNDMC-A	801
EA	Intel Swab (1% Test Kit) (2 pack)	2,400	CA1000140	2,400	\$0.0000	PNDMC-A	802

Print Name of Person Who Picked Up Supplies: \_\_\_\_\_ DSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies: \_\_\_\_\_ Date \_\_\_\_\_

Time \_\_\_\_\_

Receipt NO  
 RCV00000

RECEIVED  
 JAN 06 2025  
 Kelly



# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Daisy Aguilar, David Lawlor and DPH Logistics Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH-DOC Logistics Resource [REDACTED]

Order Number

Beginning Summary Date  
 End Summary Date  
 Time of Pickup

1/10/2025

DPH will deliver to 375 Laquna Honda Blvd, Loading Dock  
 Itemize Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

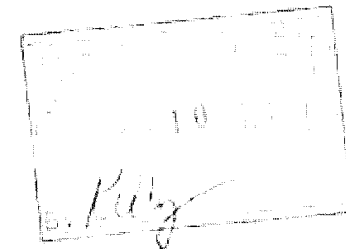
RCV0000

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	Inhealth COVID-19 Antigen Rapid Test (5 per box)	1,872	CA1000140	1,872	\$0.0000	PNDMC-A	803
EA	Forix Covid-19 at home test kit OTC (2 pack)	300	CA1000141	300	\$0.0000	PNDMC-A	804
EA	Pilot Covid-19 at home (4 pack)	2,016	CA1000142	2,016	\$0.0000	PNDMC-A	805

Print Name of Person Who Picked Up Supplies \_\_\_\_\_ DSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies \_\_\_\_\_ Date \_\_\_\_\_

Time \_\_\_\_\_



# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Daisy Aguila, David Lawlor and DPH Logs Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH DOC Logs Resource [REDACTED]

Order Number

Beginning Summary Date  
 End Summary Date  
 Time of Pickup

1-17-25  
 1/10/2025

DPH will deliver to 375 Laguna Honda Blvd, Loading Dock  
 Itemize Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

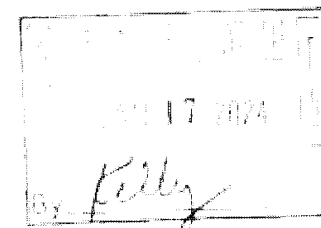
REV0000

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	Inbios Scan-2 AG Detect Self Test Kit Covid-19	1,920	CA1000138	1,920	\$0.0000	PNDMC-A	806
EA	First Covid-19 at home (4 pack)	144	CA1000142	144	\$0.0000	PNDMC-A	807

Print Name of Person Who Picked Up Supplies \_\_\_\_\_ DSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies \_\_\_\_\_ Date \_\_\_\_\_

Time \_\_\_\_\_



# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Daisy Aquallo, David Lawlor and DPH Logs Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH-DOC Logs Resource [REDACTED]

Order Number

Beginning Summary Date  
 End Summary Date  
 Time of Pickup

1/10/2025

DPH will deliver to 375 Laguna Honda Blvd, Loading Dock  
 Itemize Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

ACV0200

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	Inbios Scov 2 AG Detect Self Test Kit Covid 19	2,496	CA1000138	2,496	\$0.0000	PNDMC-A	803
EA	Pilot Covid 19 at home (4 pack)	288	CA1000142	288	\$0.0000	PNDMC-A	809

Print Name of Person Who Picked Up Supplies \_\_\_\_\_ DSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies \_\_\_\_\_ Date \_\_\_\_\_

Time

Kelly

# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Daisy Aguilar, David Lawler and DPH Logistics Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH-DOC Logistics Resource [REDACTED]

Order Number

Beginning Summary Date  
 End Summary Date  
 Time of Pickup

2/11/2025

DPH will deliver to 375 Laguna Honda Blvd, Loading Dock  
 Itemize Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

REV0000

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	Pilot Covid-19 at home (4 pack)	144	CA1000142	144	\$0.0000	PNDMC-A	810
EA	Health COVID-19 Antigen Rapid Test (5 per box)	2,160	CA1000139	2,160	\$0.0000	PNDMC-A	811
EA	IntelSwab OTC Test Kit (2 pack)	144	CA1000133	144	\$0.0000	PNDMC-A	812
EA	MaximBin Covid-19 Antigen Home Test	2,272	CA1000143	2,272	\$0.0000	PNDMC-A	813

Print Name of Person Who Picked Up Supplies \_\_\_\_\_ DSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

By: *Kelly*

# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Nancy Aguilar, David Lawlor and DPH Logistics Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH DDC Logistics Resource [REDACTED]

Order Number

Beginning Summary Date  
 End Summary Date  
 Time of Pickup

2/28/2025

DPH will deliver to 375 Laguna Honda Blvd, Loading Dock  
 Itemize Materials and Supplies for Pickup by the Department

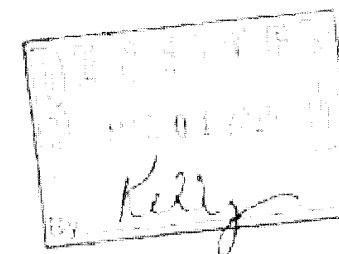
## PSFT Inventory Transactions

Rev 0000

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	Integrowell B OTC Test Kit (2 pack)	238	CA1000133	238	\$0.0000	PNDMC-A	814
EA	Advan Card 19 Antigen Home Test (2 pack)	1,152	CA1000140	1,152	\$0.0000	PNDMC-A	815
EA	Covid Covid 19 at home test kit OTC (2 pack)	150	CA1000141	150	\$0.0000	PNDMC-A	816

Print Name of Person Who Picked Up Supplies \_\_\_\_\_ DSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_



# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Eddy Aguilar, David Lawler and DPH Logistics Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH-DOC Logistics Resource [REDACTED]

Order Number

Beginning Summary Date  
 End Summary Date  
 Time of Pickup

4/11/2025

DPH will deliver to 375 Laguna Honda Blvd, Loading Dock  
 Itemize Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

RCV0000

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	Inbios Scov 2 AG Detect Self Test Kit Covid 19	144	CA1000138	144	\$0.0000	PNDMC-A	821
EA	Breath COVID 19 Antigen Rapid Test (5 per box)	405	CA1000139	405	\$0.0000	PNDMC-A	822
EA	Covidx Covid 19 at home test kit DTC (2 pack)	300	CA1000141	300	\$0.0000	PNDMC-A	823

Print Name of Person Who Picked Up Supplies \_\_\_\_\_ OSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies \_\_\_\_\_ Date \_\_\_\_\_

Time

APR 11 2025  
 By Kelly

# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Daisy Aguillo, David Lawlor and DPH Logs Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH-DOC Logs Resource [REDACTED]

Order Number

Beginning Summary Date  
 End Summary Date  
 Time of Pickup

5/9/2025

DPH will deliver to 375 Laguna Honda Blvd, Loading Dock

Itemize Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

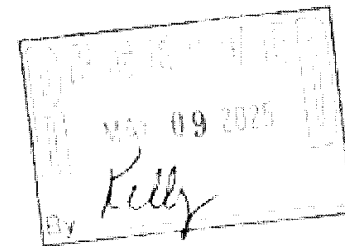
RCV0000

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	Test Kit Carestart Antigen Home (2pk)	348	CA1000137	348	\$0.0000	PNDMC-A	825
EA	<del>COVID-19</del> <sup>GEN BODY</sup> COVID19 Antigen Rapid Test (5 per box)	144	CA1000144	144	\$0.0000	PNDMC-A	824

Print Name of Person Who Picked Up Supplies \_\_\_\_\_ DSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies \_\_\_\_\_ Date \_\_\_\_\_

Time \_\_\_\_\_



# SUPPLY RECEIPT - Donation

Dept Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Daisy Aguilar, David Lawlor and DPH Logistics Chief  
 Contact Phone: [REDACTED]  
 Contact Email: DPH.DOC Logistics Resource [REDACTED]

Order Number

Beginning Summary Date  
 End Summary Date  
 Time of Pickup

6/2/2025

DPH will deliver to 375 Laguna Honda Blvd, Loading Dock  
 Itemize Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

Receipt REV0000

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	GenBody Covid 19 Antigen Home Test (2 pack)	144	CA1000144	144	\$0.0000	PNDMC-A	826

Print Name of Person Who Picked Up Supplies \_\_\_\_\_ DSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

RECEIVED  
 JUN 02 2025  
 By: Kelly



# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Danny Aguilar, David Lawlor, and DPH Logistics Chief  
 Contact Phone: [REDACTED]  
 Contact Email: [REDACTED]

Order Number

Beginning Summary Date  
 End Summary Date  
 Time of Pickup

6/11/2025

DPH will deliver to 375 Laguna Honda Blvd. Loading Dock  
 Itemize Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

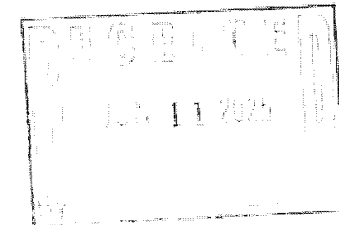
RCV0000

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	GenBody Covid-19 Antigen Home Test (2 pack)	144	CA1000144	144	\$0.0000	PNDMC-A	827
	GenBody Covid-19 Rapid Test for Home Use (2 pack)	432	CA1000145	432	\$0.0000	PNDMC-A	828

Print Name of Person Who Picked Up Supplies \_\_\_\_\_ DSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies \_\_\_\_\_ Date \_\_\_\_\_

Time \_\_\_\_\_



# SUPPLY RECEIPT - Donation

Dept. Name: Department of Public Health (DPH)  
 Address: 101 Grove Street, San Francisco  
 Contact Name: Daisy Aguilar, David Lawler and DPH Logistics Unit  
 Contact Phone: [REDACTED]  
 Contact Email: [REDACTED]

Order Number

Beginning Summary Date  
 End Summary Date  
 Time of Pickup

6/26/2025

DPH will deliver to 375 Laguna Honda Blvd. Laundry Dock  
 Itemize Materials and Supplies for Pickup by the Department

## PSFT Inventory Transactions

Receipt NO. 0000

Unit/Type	Product Description	Total Quantity	Putaway Item ID	Total QTY (EA)	Unit Cost	Location	PO #
EA	Covid-19 at home test kit DTC (2 pack)	150	CA1000141	150	\$0.0000	PNDMC-A	829

Print Name of Person Who Picked Up Supplies \_\_\_\_\_ DSW # \_\_\_\_\_

Signature of Person Who Picked Up Supplies \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

RECEIVED  
 JUN 26 2025  
 By Kelly



# San Francisco Department of Public Health

Daniel Tsai  
Director of Health

City and County of San Francisco  
Daniel Lurie  
Mayor

## Memorandum

**To:** Honorable Members of the Board of Supervisors

**From:** San Francisco Department of Public Health

**Date:** Thursday, January 8, 2026

**RE:** **Retroactivity re: File 251227**

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This Resolution seeks authorization for the Department of Public Health (DPH) to retroactively accept and expend a gift from the California Department of Public Health for COVID-19 test kits.

This gift accept and expend is retroactive because the accept and expend was not done in a timely manner due to delays with both the Health Commission and City approvals process. CDPH initially provided the gift and gift forms on July 21, 2025. Upon receipt of the gift and the forms, DPH put together the accept and expend packet and sent it to the Controller's Office on August 1, 2025. DPH received the Health Commission resolution for this item on August 13, 2025. The Controller's Office then forwarded the signed accept & expend packet to the Mayor's Office on November 7, 2025, for introduction on December 9, 2025.

We respectfully request retroactive authorization for this item. Please contact Lily Conover, SFDPH Controller, at [lily.conover@sfdph.org](mailto:lily.conover@sfdph.org) for any questions about this request for retroactive authorization.

**City and County of San Francisco**

**Department of Public Health**



**Daniel Lurie**  
**Mayor**

**TO:** Angela Calvillo, Clerk of the Board of Supervisors

**FROM:** Daniel Tsai  
Director of Health

**DATE:** 10/22/2025

**SUBJECT:** Gift Accept and Expend

**GIFT TITLE:** COVID-19 Test Kits - FY2024-2025 - \$527,664

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Attached please find the original and 1 copy of each of the following:

- ☒ Proposed Gift resolution, original signed by Department
- ☒ Gift information form, including disability checklist
- ☒ Budget and Budget Justification
- ☐ Agreement / Award Letter
- ☒ Other (Explain): Gift Questionnaire, Gift Acknowledgement letter, State Donations

**Special Timeline Requirements:**

**Departmental representative to receive a copy of the adopted resolution:**

Name: Gregory Wong (greg.wong@sfdph.org) Phone: 554-2521

Interoffice Mail Address: Dept. of Public Health, 101 Grove St # 114

Certified copy required Yes ☐

No ☒

OFFICE OF THE MAYOR  
SAN FRANCISCO



DANIEL LURIE  
MAYOR

TO: Angela Calvillo, Clerk of the Board of Supervisors  
FROM: Adam Thongsavat, Liaison to the Board of Supervisors  
RE: Accept and Expend In-Kind Gift - Administration for Strategic Preparedness and Response -  
California Department of Public Health - COVID-19 Test Kits - FY2024-2025 - \$527,664  
DATE: December 9, 2025

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Resolution retroactively authorizing the Department of Public Health to accept and expend an in-kind gift of COVID-19 test kits in the total amount of \$527,664 from the Administration for Strategic Preparedness and Response through the California Department of Public Health in support of the Department of Public Health clinic patients and staff.

Should you have any questions, please contact Adam Thongsavat at [adam.thongsavat@sfgov.org](mailto:adam.thongsavat@sfgov.org)