



**San Francisco Ethics Commission**

25 Van Ness Avenue, Suite 220, San Francisco, CA 94102  
 Phone: 415.252.3100 . Fax: 415.252.3112  
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Received On: 02-10-2025 | 18:28:50 PST

File #: 241129

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	
<b>TYPE OF FILING</b>	<b>DATE OF ORIGINAL FILING (for amendment only)</b>
Original	
<b>AMENDMENT DESCRIPTION – Explain reason for amendment</b>	

2. CITY ELECTIVE OFFICE OR BOARD	
<b>OFFICE OR BOARD</b>	<b>NAME OF CITY ELECTIVE OFFICER</b>
Board of Supervisors	Members

3. FILER'S CONTACT	
<b>NAME OF FILER'S CONTACT</b>	<b>TELEPHONE NUMBER</b>
Angela Calvillo	415-554-5184
<b>FULL DEPARTMENT NAME</b>	<b>EMAIL</b>
office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT	
<b>NAME OF DEPARTMENTAL CONTACT</b>	<b>DEPARTMENT CONTACT TELEPHONE NUMBER</b>
Loren Newquist	628-652-7133
<b>FULL DEPARTMENT NAME</b>	<b>DEPARTMENT CONTACT EMAIL</b>
CHF Children, Youth and Their Families	loren.newquist@dcyf.org

5. CONTRACTOR	
<b>NAME OF CONTRACTOR</b> Richmond District Neighborhood Ctr Inc	<b>TELEPHONE NUMBER</b> 415-941-7768
<b>STREET ADDRESS (including City, State and Zip Code)</b> 741 30th Avenue, San Francisco, CA 94121	<b>EMAIL</b>

6. CONTRACT		
<b>DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)</b> 2/4/2025	<b>ORIGINAL BID/RFP NUMBER</b>	<b>FILE NUMBER (If applicable)</b> 241129
<b>DESCRIPTION OF AMOUNT OF CONTRACT</b> NTE \$10,366,200		
<b>NATURE OF THE CONTRACT (Please describe)</b> Richmond District Neighborhood Ctr Inc four programs in Result Area All Children And Youth Are Ready To Learn And Succeed In School: 1)Defining Success: Academic Support Continuum, 6th-12th Grade Program provides tutoring, summer transitions, high school and college prep workshops. 2)Beacon Pathways at Presidio Middle School Program provides expanded learning, engaging after school enrichments and academics, behavioral health and wellness support. 3)Beacon Pathways at Roosevelt Middle School Program provides project based learning, culturally responsive and SEL programs, expanded learning. 4)Multi-Cultural Arts Program: K-12 Art Pathways provides developmentally appropriate continuum of visual, performing, and instrumental arts programs.		

7. COMMENTS

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

**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	Yee	Cliff	Board of Directors
2	Marcus	Ariane	Board of Directors
3	Chu	Melissa	Board of Directors
4	Fisher	Michael	Board of Directors
5	Chaudhary	Omer	Board of Directors
6	Chinn	will	Board of Directors
7	Hongola-Baptista	Cathy	Board of Directors
8	Lin	Lily	Board of Directors
9	Riordan	Michael	Board of Directors
10	Vuong	John	Board of Directors
11	Cusano	Michelle	CEO
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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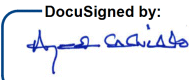
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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Check this box if you need to include additional names. Please submit a separate form with complete information. Select “Supplemental” for filing type.

**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><b>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</b></p>  <p>DocuSigned by: 988C8F42C3084B5 Angela Calvillo</p>	<p><b>DATE SIGNED</b></p> <p>02-10-2025   18:28:50 PST</p>
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