



San Francisco Ethics Commission

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

Received On: 05-19-2023 | 16:38:21 PDT

File #: 230404

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
Joyce Kimotsuki	415-554-6562
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
CON Office of the Controller	joyce.kimotsuki@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Macias Gini & O'Connell LLP	TELEPHONE NUMBER (925) 395-2831
STREET ADDRESS (including City, State and Zip Code) 2121 N. California Blvd, S 750, Walnut Creek, CA 94596	EMAIL alouie@mgocpa.com

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S) 05/16/2023	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 230404
DESCRIPTION OF AMOUNT OF CONTRACT \$6,806,424		
NATURE OF THE CONTRACT (Please describe) The Controller's Office needs to obtain independent auditing and accounting services to comply with City Charter Section 2.115 and California Government Code Sections 25250 and 25253, which requires City to have its annual audits performed by independent public accounting firms.		

7. COMMENTS

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	O'Connell	Kevin	Board of Directors
2	Pon	Cynthia	Board of Directors
3	Colon	Francisco	Board of Directors
4	Agarwal	Sanjay	Board of Directors
5	Berg	Danielle	Board of Directors
6	Young	Charles	Board of Directors
7	Perkins	Stephanie	Board of Directors
8	Moore	Vernon	Board of Directors
9	Sapowith	Matthew	Board of Directors
10	Schwartz	Michael	Board of Directors
11	O'Connell	Kevin	COO
12	O'Connell	Kevin	Shareholder
13	Pon	Cynthia	CFO
14	Pon	Cynthia	Shareholder
15	Kevin W. Harper CPA		Subcontractor
16	Lamorena & Chang, CPA		Subcontractor
17	Calvin Y. Louie, CPA		Subcontractor
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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
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9. AFFILIATES AND SUBCONTRACTORS

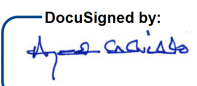
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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<input type="checkbox"/>	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" 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:  988C8F42C3084B5 Angela Calvillo</p>	<p>DATE SIGNED</p> <p>05-19-2023 16:38:21 PDT</p>
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