

## 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 | 21:13:21 PDT

File #: 200180 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: <a href="https://sfethics.org/compliance/city-officers/contract-approval-city-officers">https://sfethics.org/compliance/city-officers/contract-approval-city-officers</a>

1. FILING INFORMATION						
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)					
Original						
or rginar						
AMENDMENT DESCRIPTION – Explain reason for amendment	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 DEF	PARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Cheryl Nashir		650.821.4500
FULL DEPART	MENT NAME	DEPARTMENT CONTACT EMAIL
AIR	Airport Commission	Cheryl.Nashir@flyfo.com

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
SSP America, Inc.	(202) 321-7028
STREET ADDRESS (including City, State and Zip Code)	EMAIL
19465 Deerfield Avenue, Suite 105, Lansdowne, VA 20176	pat.murray@foodtravelexperts.com

19465 Deerfield Avenue, Suite 105, Lansdowne,	VA 20176	pat.murr	ray@roodtraverexperts.com	
6. CONTRACT				
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (If applicable)	
10/06/2020			200180	
DESCRIPTION OF AMOUNT OF CONTRACT	I		l	
\$279,000 (Minimum Annual Guarantee)				
NATURE OF THE CONTRACT (Please describe)				
International Terminal Food and Beverage Lease No. 16-0017 for one facility located in the International Terminal post-security Boarding Area G, as 1300 on Fillmore.				
7. COMMENTS				
8. CONTRACT APPROVAL				
This contract was approved by:				
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 ELECTIV	/E OFFICER(S) I	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.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
1	Svagdis	Michael	CEO
2	Worrell	Rorger	CF0
3	Banducci	Patrick	C00
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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	ТҮРЕ
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9. AFFILIATES AND SUBCONTRACTORS			
List the names of (A)	members of the contractor's board of o		

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COTT	contract.			
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ	
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	Check this box if you need to include add Select "Supplemental" for filing type.	itional names. Please submit a separate	form with complete information.	

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.				
SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR	DATE SIGNED			
CLERK DocuSigned by:  988C8F42C3084B5  Angela Calvillo	10-13-2020   21:13:21 PDT			