

# 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:

File #:

Bid/RFP #: 1177

# **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: <u>https://sfethics.org/compliance/city-officers/contract-approval-city-officers</u>

1. FILING INFORMATION	2
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
Original	S.
AMENDMENT DESCRIPTION – Explain reason for amendment	NO.
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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. CONTRACT	TING DEPARTMENT CONTACT	
NAME OF DEPARTMENTAL CONTACT		DEPARTMENT CONTACT TELEPHONE NUMBER
Jennifer	Grant	415-355-6801
FULL DEPARTN	ΛΕΝΤ ΝΑΜΕ	DEPARTMENT CONTACT EMAIL
HSA	Dept of Disability & Aging Services	Jennifer.Grant@sfgov.org

N.

7. COMMENTS

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
Meals On Wheels of San Francisco	415-920-1111
STREET ADDRESS (including City, State and Zip Code)	EMAIL
2142 Jerrold Avenue, san Francisco, CA 94124	JSteele@mowsf.org
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6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
	1177	250581
DESCRIPTION OF AMOUNT OF CONTRACT		
\$37,127,237		
NATURE OF THE CONTRACT (Please describe)		
This grant is for the provision of Home-Deliver The demand for nutrition services in the commun be a serious concern for older adults living i	nity is elevated and f	

8. C0	ONTRACT 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 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	ТҮРЕ
1	Steele	Jennifer	CEO
2	Knight	Danielle	CFO
3	Duarte	Phil	соо
4	Allen	José	Board of Directors
5	Viola	John	Board of Directors
6	Kalbag	Rohan	Board of Directors
7	Carges	Mark	Board of Directors
8	Wong	Rosemary	Board of Directors
9	Ballati	Deborah	Board of Directors
10	Black	Cindy	Board of Directors
11	Bloemker	Shannon	Board of Directors
12	Flynn	Sara	Board of Directors
13	Gibin	Leslie	Board of Directors
14	Кжеі	Eileen	Board of Directors
15	Landa	Enrique	Board of Directors
16	Moliski	Bill	Board of Directors
17	Navid	Mohammad	Board of Directors
18	Petersen	Mark	Board of Directors
19	Resley	Susan	Board of Directors

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
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47			A CONTRACTOR
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	Check this box if you need to include add Select "Supplemental" for filing type.	litional 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 CLERK	DATE SIGNED
BOS Clerk of the Board	