

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 #: 220456

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

1. FILING INFORMATION	4
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
Original	S.
AMENDMENT DESCRIPTION – Explain reason for amendment	* O
	36
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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. CONTRACTING DEPARTMENT CONTACT			
NAME OF DEPARTMENTAL CONTACT		DEPARTMENT CONTACT TELEPHONE NUMBER	
Arata Goto		415-701-5500	
FULL DEPARTMENT NAME		DEPARTMENT CONTACT EMAIL	
MYR	Mayor's Office of Housing & Comm. Dev.	CommDevRFP@Sfgov.org	

5. CONTRACTOR			
NAME OF CONTRACTOR		TELEPHONE N	IUMBER
Catholic Charities CYO of the Archdiocese of S	an Franc	415-972-1211	
STREET ADDRESS (including City, State and Zip Code)		EMAIL	
1555 39th Avenue San Francisco, CA 94122			
6. CONTRACT			
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (If applicable) 220456
DESCRIPTION OF AMOUNT OF CONTRACT			
\$313,541			
NATURE OF THE CONTRACT (Please describe)			
Subsidies	.0	and Healt	n - Tenant Based Rental
7. COMMENTS			
8. CONTRACT APPROVAL			
This contract was approved by:			
THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM			

8. C	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

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	Cordileone	Salvatore	Board of Directors
2	Boerio	Joe	Board of Directors
3	Borromeo	Ted	Board of Directors
4	Grogan	Kathleen	Board of Directors
5	Sundby	George	Board of Directors
6	Bojorquez	Diana	Board of Directors
7	Brigham	Martha	Board of Directors
8	Clark	Philip	Board of Directors
9	Dahik	Adriana	Board of Directors
10	O'Brien Frimel	Susie	Board of Directors
11	Gelt	Jerilyn	Board of Directors
12	Ghilotti	Michael	Board of Directors
13	Gonzalez	Eleanor	Board of Directors
14	Hultman	David	Board of Directors
15	Ikeda	Lisa	Board of Directors
16	Kearney	Philip	Board of Directors
17	Landis	Scott	Board of Directors
18	Peupp	Jay Paul	Board of Directors
19	McInerney	Sister Maureen	Board of Directors

3

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
20	Mirek	Lori	Board of Directors
21	Nascimento	Daniel	Board of Directors
22	Pohlman	Jack	Board of Directors
23	Raymund	Reyes	Board of Directors
24	Reynaud	Louis	Board of Directors
25	Sangiacomo	Jim 🕠	Board of Directors
26	Woody	Patrick	Board of Directors
27	Ewers	Cheryl	CF0
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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 39 40 41 42 43 44 45 46 47 48 49 50 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.		
SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK DATE SIGNED		
BOS Clerk of the Board		



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TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
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Original	03.
AMENDMENT DESCRIPTION – Explain reason for amendment	***
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	X
	YA COMPANY

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

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NAME OF DEPARTMENTAL CONTACT		DEPARTMENT CONTACT TELEPHONE NUMBER	
Arata Goto		415-701-5500	
FULL DEPARTMENT NAME		DEPARTMENT CONTACT EMAIL	
MYR	Mayor's Office of Housing & Comm. Dev.	CommDevRFP@sfgov.org	

5. CONTRACTOR				
NAME OF CONTRACTOR		TELEPHONE N	IUMBER	
Catholic Charities CYO of the Archdiocese of Sa	an Franc	415-972-1211		
STREET ADDRESS (including City, State and Zip Code)		EMAIL		
1555 39th Avenue San Francisco, CA 94122				
6. CONTRACT				
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (<i>If applicable</i>) 220456	
DESCRIPTION OF AMOUNT OF CONTRACT				
\$762,114				
NATURE OF THE CONTRACT (Please describe)				
HOPWA Funds for Project ID - 160078-21 Peter Claver Community RCFCI/Residential care facility for persons with HIV/AIDS				
SA CALL TO THE PARTY OF THE PAR				
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7. COMMENTS				

8. C	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 BOADD OF A STATE ACENICY ON WHICH AN ADDOINTEE OF THE CITY ELECTIVE OFFICED (C) IDENTIFIED ON THE FORM CITS
	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

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1	Cordileone	Salvatore	Board of Directors			
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5	Sundby	George	Board of Directors			
6	Bojorquez	Diana	Board of Directors			
7	Brigham	Martha	Board of Directors			
8	Clark	Philip	Board of Directors			
9	Dahik	Adriana	Board of Directors			
10	O'Brien Frimel	Susie	Board of Directors			
11	Gelt	Jerilyn	Board of Directors			
12	Ghilotti	Michael	Board of Directors			
13	Gonzalez	Eleanor	Board of Directors			
14	Hultman	David	Board of Directors			
15	Ikeda	Lisa	Board of Directors			
16	Kearney	Philip	Board of Directors			
17	Landis	Scott	Board of Directors			
18	Peupp	Jay Paul	Board of Directors			
19	McInerney	Sister Maureen	Board of Directors			

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22	Pohlman	Jack	Board of Directors
23	Reyes	Raymund	Board of Directors
24	Reynaud	Louis	Board of Directors
25	Sangiacomo	Jim	Board of Directors
26	Woody	Patrick	Board of Directors
27	Ewers	Chery1	CF0
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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 39 40 41 42 43 44 45 46 47 48 49 50 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.

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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. CONTRACTING DEPARTMENT CONTACT			
NAME OF DEPARTMENTAL CONTACT		DEPARTMENT CONTACT TELEPHONE NUMBER	
Arata Got	0	415-701-5500	
FULL DEPARTMENT NAME		DEPARTMENT CONTACT EMAIL	
MYR	Mayor's Office of Housing & Comm. Dev.	commdevRFP@sfgov.org	

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
Dolores Street Community Services, Inc.	(415) 282-6209
STREET ADDRESS (including City, State and Zip Code)	EMAIL
938 Valencia St., San Francisco, CA 94110	

93	8 Valencia St., San Francisco, CA 94110			
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6. C	ONTRACT			
DAT	E CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (If applicable) 220456
DESC	CRIPTION OF AMOUNT OF CONTRACT			
\$3	99,481			
NAT	URE OF THE CONTRACT (Please describe)			
но	PWA Grant for Residential care facility for		h HIV/AIDS	
7. C	DMMENTS			
8. C	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 ELECTIV	/E OFFICER(S) I	DENTIFIED ON THIS FORM SITS

con	contract.					
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ			
1	Valdez	Laura	CEO			
2	Winn	Michael	Board of Directors			
3	Avila	Rocio	Board of Directors			
4	Lin	Kani	Board of Directors			
5	Hernandez	Pedro	Board of Directors			
6	Cameron	Anjali	Board of Directors			
7	Penfold	Ward	Board of Directors			
8	Leonard	Anat	Board of Directors			
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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		



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TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
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Original	03.
AMENDMENT DESCRIPTION – Explain reason for amendment	***
	1
	X
	YA COMPANY

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 DEPA	ARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnolat		415-701-5500
FULL DEPARTM	MENT NAME	DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Housing & Comm. Dev.	dolly.sithounnolat@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
Larkin Street Youth Services	415-673-0911
STREET ADDRESS (including City, State and Zip Code)	EMAIL
134 Golden Gate Avenue, San Francisco, CA 94102	sadams@larkinstreetyouth.org

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6. CONTRACT			
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/R	FP NUMBER	FILE NUMBER (<i>If applicable</i>) 220456
DESCRIPTION OF AMOUNT OF CONTRACT			
\$197,044			
NATURE OF THE CONTRACT (Please describe)			
HOPWA Grant for residential care facility for	persons with	HIV/AIDS	(Project ID 160145-21)
	S.	JON K.	
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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 ELECTIVE	OFFICER(S) II	DENTIFIED ON THIS FORM SITS

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cont	contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ		
1	Adams	Sherilyn	CEO		
2	Alexander	Susan	Board of Directors		
3	Moise	Adam	Board of Directors		
4	Newton, Jr.	Willis	Board of Directors		
5	Cody	Daniel	Board of Directors		
6	Grossman	Blake	Board of Directors		
7	Shapiro	Sally	Board of Directors		
8	Avenier	Jeremy	Board of Directors		
9	Barnett	Fiona	Board of Directors		
10	Berg	Siri O'Hara	Board of Directors		
11	Brahm	Jennifer	Board of Directors		
12	Cameron	Cecily	Board of Directors		
13	Elias	Marcie	Board of Directors		
14	Famulener	Conor	Board of Directors		
15	F00	Catherine	Board of Directors		
16	Hicks	John	Board of Directors		
17	Hoecker	Anne	Board of Directors		
18	Horn	Tim	Board of Directors		
19	Johnson	Eric	Board of Directors		

cont	contract.			
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТУРЕ	
20	Kerzic	Richard	Board of Directors	
21	Kiss	Patrick	Board of Directors	
22	Kitchen	Natalie Havany	Board of Directors	
23	Roos	Eric	Board of Directors	
24	Valentine	D. Kemp	Board of Directors	
25	Viola	John	Board of Directors	
26	Obaro	Bambo	Board of Directors	
27	Matlock	Michael	Board of Directors	
28	Alexander	Suzi	Board of Directors	
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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 39 40 41 42 43 44 45 46 47 48 49 50 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.

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A Public Document

1. FILING INFORMATION	9
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
Original	S.
AMENDMENT DESCRIPTION – Explain reason for amendment	0
	Q_{λ}

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 DEP	ARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER		
Dolly Sithounnolat		415-701-5500		
FULL DEPARTM	MENT NAME	DEPARTMENT CONTACT EMAIL		
MYR	Mayor's Office of Housing & Comm Dev	dolly.sithounnolat@sfgov.org		

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
Maitri Compassionate Care	415-558-3000
STREET ADDRESS (including City, State and Zip Code)	EMAIL
401 Duboce Avenue, San Francisco, CA 94117	rsmith@maitrisf.org

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6. CONTRACT			
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/R	FP NUMBER	FILE NUMBER (<i>If applicable</i>) 220456
DESCRIPTION OF AMOUNT OF CONTRACT			
\$492,167			
NATURE OF THE CONTRACT (Please describe)	?_		
HOPWA Grant for residential care facility for	persons with	HIV/AIDS	(Project ID 160152-21)
	S. S.	JON KU	
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			<u>V</u>
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			
300.00 Super v 13013			
THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF	THE CITY ELECTIVE	OFFICER(S) II	DENTIFIED ON THIS FORM SITS
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ			
1	Armentrout	Michael	CEO			
2	Richardson	Justin	CF0			
3	Lapointe	Ray	Board of Directors			
4	Wong	Jane	Board of Directors			
5	Miller	Austin	Board of Directors			
6	Cummings	Gregg	Board of Directors			
7	King	Jim	Board of Directors			
8	Casados	Johannes	Board of Directors			
9	Cummings	Donna	Board of Directors			
10	Dilawri	Namita	Board of Directors			
11	Rana	Sameera	Board of Directors			
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТУРЕ
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OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER	
Board of Supervisors	Members	

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NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
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Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

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NAME OF DEP	ARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER		
Dolly Sithounnolat		415-701-5500		
FULL DEPARTN	MENT NAME	DEPARTMENT CONTACT EMAIL		
MYR	Mayor's Office of Housing & Comm Dev	dolly.sithounnolat@sfgov.org		

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
Mercy Housing California XVII, A California Limited Pa	415-355-7100
STREET ADDRESS (including City, State and Zip Code)	EMAIL
1256 Market Street, San Francisco, CA 94102	dshoemaker@mercyhousing.org

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6. CONTRACT			
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/R	FP NUMBER	FILE NUMBER (If applicable) 220456
DESCRIPTION OF AMOUNT OF CONTRACT			
50,000			
NATURE OF THE CONTRACT (Please describe)			
HOPWA Grant for Derek Silva, transitional hous (Project ID 160156-21)	S.	for perso	
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7. COMMENTS			
O CONTRACT APPROVAL			
8. CONTRACT APPROVAL This contract was approved by:			
This contract was approved by: THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM			
I THE COLL PRECION OF FICER(S) IDEINTIFIED ON THIS FORIN			
A ROADD ON WHICH THE CITY ELECTIVE OFFICE OF COME			
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 FI FCTIVE	OFFICER(S)	DENTIFIED ON THIS FORM SITS
	GITT ELECTIVE	c.m(3) II	

cont	contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ		
1	Shoemaker	Doug	CEO		
2	Guerrero	Ismael	Other Principal Officer		
3	Walsh	Dee	Other Principal Officer		
4	Bruno	Angela	Other Principal Officer		
5	Cox	Bradley	Board of Directors		
6	Smith	Kay Fernandez	Board of Directors		
7	Fish	Ford	Board of Directors		
8	Garcia	Christina	Board of Directors		
9	Hayner	Jamarah	Board of Directors		
10	Hughes	Phyllis	Board of Directors		
11	Jamason	Ellen	Board of Directors		
12	Lee	Christopher	Board of Directors		
13	Levine	David	Board of Directors		
14	Mersey	Exra	Board of Directors		
15	Nguyen	Linda	Board of Directors		
16	Pavao	William	Board of Directors		
17	Ruggiero	Janet	Board of Directors		
18	Saez	Mirian	Board of Directors		
19	Soni	S. Monica	Board of Directors		

cont	contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ		
20	Cochran	Patricia	Board of Directors		
21	Perez	Katherine Aguilar	Board of Directors		
22	Berteges	JoAnn	Board of Directors		
23	Busch	Barbara	Board of Directors		
24	Byers	Тот	Board of Directors		
25	Camacho	Yvonne	Board of Directors		
26	Dias	Alwyn	Board of Directors		
27	Ekc	Patricia	Board of Directors		
28	Francis	Charlie	Board of Directors		
29	Gerety	Jane	Board of Directors		
30	Нејпа	Diane	Board of Directors		
31	Jackson	David	Board of Directors		
32	Jutte	Doug	Board of Directors		
33	Kelley	Barbara	Board of Directors		
34	Madell	Ed	Board of Directors		
35	Neumann	Paul	Board of Directors		
36	Ross	Sam	Board of Directors		
37	Snyder	will	Board of Directors		
38	Werthman	Linda	Board of Directors		
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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 39 40 41 42 43 44 45 46 47 48 49 50 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.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR **DATE SIGNED CLERK** BOS Clerk of the Board



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 #: 220456

1

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

1. FILING INFORMATION	9
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
Original	S.
AMENDMENT DESCRIPTION – Explain reason for amendment	0
	Q_{λ}

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
Dolly Sithounnolat		415-701-5500
FULL DEPARTN	MENT NAME	DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Housing & Comm Dev	dolly.sithounnolat@sfgov.org

5. CONTRACTOR			
NAME OF CONTRACTOR		TELEPHONE N	IUMBER
PRC		415-777-	0333
STREET ADDRESS (including City, State and Zip Code)		EMAIL	
170 9th Street, San Francisco, CA 94103		brett.an	drews@prcsf.org
6. CONTRACT			
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (<i>If applicable</i>) 220456
DESCRIPTION OF AMOUNT OF CONTRACT			
\$2,065,000			
NATURE OF THE CONTRACT (Please describe)			
HOPWA Grant for Leland House, residential care ID 167650-21)			
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7. COMMENTS			
8. CONTRACT APPROVAL This contract was approved by:			
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) II	DENTIFIED ON THIS FORM SITS

COIII	contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТУРЕ		
1	Andrews	Brett	CEO		
2	Schneider	Brian	Board of Directors		
3	Roger	Kent M.	Board of Directors		
4	Schroeder	Tim	Board of Directors		
5	Brown	Chris	Board of Directors		
6	Callaghan	Larkin	Board of Directors		
7	Frieman	Josh	Board of Directors		
8	Gonzalez	Nelson	Board of Directors		
9	Ishia	Ryo	Board of Directors		
10	Michaels	Jacques	Board of Directors		
11	Niczyporuk	Michael	Board of Directors		
12	Papilion	Zack	Board of Directors		
13	Smith	Darren	Board of Directors		
14	Steinberg	Michael	Board of Directors		
15	Treaster	Merredith	Board of Directors		
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#	ract. LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТУРЕ
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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 39 40 41 42 43 44 45 46 47 48 49 50 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.		
SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR	DATE SIGNED	
CLERK		
BOS Clerk of the Board		



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A Public Document

1. FILING INFORMATION	9
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
Original	S.
AMENDMENT DESCRIPTION – Explain reason for amendment	0
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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. CONTRACTING DEPARTMENT CONTACT			
NAME OF DEP	ARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER	
Gloria Woo		415-701-5500	
FULL DEPARTMENT NAME		DEPARTMENT CONTACT EMAIL	
MYR	Mayor's Office of Housing and Comm Dev	gloria.woo@sfgov.org	

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
Rafiki Coalition for Health and Wellness	(415) 615-9945
STREET ADDRESS (including City, State and Zip Code)	EMAIL
601 Cesar Chavez, San Francisco, CA 94124	

60	1 Cesar Chavez, San Francisco, CA 94124			
	70			
6. C	ONTRACT			
DAT	E CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (If applicable) 220456
DESC	CRIPTION OF AMOUNT OF CONTRACT			
\$1	50,000			
NAT	URE OF THE CONTRACT (Please describe)			
	PWA grant for transitional housing facility 60181-21)		with HIV/	
7. C	OMMENTS			
8. C	ONTRACT APPROVAL			
	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

# LAST NAME/ENTITY/SUBCONTRACTOR FIRST NAME TYPE 1 Elawar May Board of Directors 2 Prince Cynthia Board of Directors 3 Williams Lisa Board of Directors 4 Gaines Mark Board of Directors 5 Frankel Kevin Board of Directors 6 Moats Phyllis Board of Directors 7 Oertel Diana Board of Directors 8 Strong Shirley Board of Directors 9 Lesarre Monique CEO 10 Brown David CFO 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	contract.			
Prince Cynthia Board of Directors Williams Lisa Board of Directors Gaines Mark Board of Directors Frankel Kevin Board of Directors Moats Phyllis Board of Directors Oertel Diana Board of Directors Strong Shirley Board of Directors Lesarre Monique CED Brown David CFO Promotion CFO Prince Cynthia Board of Directors Board of Directors CFO CFO CFO CFO CFO CFO CFO CF	#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
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4 Gaines Mark Board of Directors 5 Frankel Kevin Board of Directors 6 Moats Phyllis Board of Directors 7 Oertel Diana Board of Directors 8 Strong Shirley Goard of Directors 9 LeSarre Monique CEO 10 Brown David CFO 11 12 13 14 15 16 17 18	2	Prince	Cynthia	Board of Directors
5 Frankel Kevin Board of Directors 6 Moats Phyllis Board of Directors 7 Oertel Diana Board of Directors 8 Strong Shirley Board of Directors 9 LeSarre Monique CEO 10 Brown David CFO 11 12 13 14 15 16 17 18	3	Williams	Lisa	Board of Directors
6 Moats Phyllis Board of Directors 7 Oertel Diana Board of Directors 8 Strong Shirley Board of Directors 9 Lesarre Monique CEO 10 Brown David CFO 11 12 13 14 15 16 17 18	4	Gaines	Mark	Board of Directors
7 Oertel Diana Board of Directors 8 Strong Shirley Board of Directors 9 LeSarre Monique CEO 10 Brown David CFO 11 12 13 14 15 16 16 17	5	Frankel	Kevin	Board of Directors
8 Strong Shirley Board of Directors 9 LeSarre Monique CEO 10 Brown David CFO 11 12 13 14 15 16 17 18	6	Moats	Phyllis	Board of Directors
9 LeSarre Monique CEO 10 Brown David CFO 11	7	0ertel	Diana	Board of Directors
10 Brown David CFO 11	8	Strong	Shirley	Board of Directors
11 12 13 14 15 16 17 18	9	LeSarre	Monique	CEO
12 13 14 15 16 17 18	10	Brown	David	CF0
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contract.			
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SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED	
BOS Clerk of the Board		