

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: 07-15-2022 | 17:47:02 PDT

File #: 220658

Bid/RFP #: 0000006802

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. CONTRAC	TING DEPARTMENT CONTACT	
NAME OF DEPARTMENTAL CONTACT		DEPARTMENT CONTACT TELEPHONE NUMBER
Victoria	Falcon	(415) 554-6734
FULL DEPARTMENT NAME		DEPARTMENT CONTACT EMAIL
OCA	Office of Contract Administration	victoria.falcon@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
San Francisco Bay Times	(415) 601-2113
STREET ADDRESS (including City, State and Zip Code)	EMAIL
358 Noe St. San Francisco, CA 94114	bettysnie@aol.com

358 NOE St. San Francisco, CA 94114		bettysni	ewao i . com
6. CONTRACT			
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (If applicable) 220658
07/12/2022	0000006802		220030
DESCRIPTION OF AMOUNT OF CONTRACT			
\$10,000			
NATURE OF THE CONTRACT (Please describe)			
The purpose of this contract is to provide out printed in the City and circulate primarily in the City. 7. COMMENTS	reach advert outreach co	tising in pommunities	publications that are and neighborhoods for
Amount is referenced in ADM Memo attachment in	file.		
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
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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	ТУРЕ
1	Sullivan	Betty	CEO
2	Viegas	Jennifer	Other Principal Officer
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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.

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ		
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9. A	FFILIATES AND SUBCONTRACTORS		
List to	the names of (A) members of the contract cutive officer, chief financial officer, chief of has an ownership interest of 10 percent or cract.	operating officer, or other persons with s	similar titles; (C) any individual or entity
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТУРЕ
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	Check this box if you need to include add Select "Supplemental" for filing type.	ditional names. Please submit a separate	form with complete information.
	VERIFICATION		
l ha	ve used all reasonable diligence in prepar	ing this statement. I have reviewed this s	tatement and to the best of my

	Check this box if you need to include additional names. Please Select "Supplemental" for filing type.	ease submit a separate	form with complete information.
10.	VERIFICATION		
kno	eve used all reasonable diligence in preparing this statement owledge the information I have provided here is true and contribution of perjury under the laws of the State of	mplete.	·
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SIGI	NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR	DATE SIGNED	
SIGI CLE	NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR	T	7:47:02 PDT