

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:⁰¹⁻¹²⁻²⁰²³ | 12:07:05 PST

File #: 221157

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

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
Bryn Mille	er	978-460-2875
FULL DEPARTMI	ENT NAME	DEPARTMENT CONTACT EMAIL
НОМ	Homelessness and Supportive Housing	bryn.miller@sfgov.org

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

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
01/10/2023		221157
DESCRIPTION OF AMOUNT OF CONTRACT		
\$7,147,000		
NATURE OF THE CONTRACT (Please describe)		
Agreement for property management services and	lassa for Bormanont	Supportive Housing at
3061 16th Street.	Tease for Permanent	Supportive Housing at

7. COMMENTS

X

Description of Amount reflects the reduction of NTE amount from '\$7,446,000' to '\$7,147,000' as amended in Committee.

8. CO	NTR/	ACT	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	Valdéz	Laura	CEO
2	Hidalgo	Saul	CFO
3	Winn	Michael	Board of Directors
4	Hernandez	Pedro	Board of Directors
5	Lin	Kani	Board of Directors
6	Cameron	Anjali	Board of Directors
7	Leonard-Wookey	Anat	Board of Directors
8	Tanaka	Chelsey	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	ТҮРЕ
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
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	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 DocuSigned by: 988C8F42C3084B5 Angela Calvillo	01-12-2023 12:07:05 PST