

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 #: 230412

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

<u> </u>	
1. FILING INFORMATION	
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
	.0
Original	03.
AMENDMENT DESCRIPTION – Explain reason for amendment	***
	<b>1</b>
	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 DEPARTMENTAL CONTACT		DEPARTMENT CONTACT TELEPHONE NUMBER	
Dolly Sithounnolat		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
Catholic Charities CYO of the Archdiocese of SF	(415) 972-1200
STREET ADDRESS (including City, State and Zip Code)	EMAIL
990 Eddy St. San Francisco, CA 94109	moreinfo@catholiccharitiessf.org

990 Eddy St. San Francisco, CA 94109		moreinto	wcathoriccharitiessr.org
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6. CONTRACT			
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	
<b>₹</b>			230412
DESCRIPTION OF AMOUNT OF CONTRACT			
\$212,943			
NATURE OF THE CONTRACT (Please describe)			
\$212,943 - ESG funds for Homelessness Prevent	ion for ind	ividuals (	Project ID:HSH1)
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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 ELECTIV	/E OFFICER(S) I	DENTIFIED ON THIS FORM SITS
$ \sqcup $			

cont	contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТУРЕ		
1	Hammerle	Ellen	CEO		
2	Ewers	Cheryl	CF0		
3	Cordileone	Salvatore	Board of Directors		
4	Boerio	Joe	Board of Directors		
5	Booromeo	Ted	Board of Directors		
6	Gorgan	Kathleen	Board of Directors		
7	Bojorquez	Diana	Board of Directors		
8	Clark	Philip	Board of Directors		
9	Dahik	Adriana	Board of Directors		
10	O'Brien Frimel	Susie	Board of Directors		
11	Ghilotti	Michael	Board of Directors		
12	Gonzalez	Eleanor	Board of Directors		
13	Hultman	David	Board of Directors		
14	Ikeda	Lisa	Board of Directors		
15	Kearney	Philip	Board of Directors		
16	Landis	Scott	Board of Directors		
17	Leupp	Jay Paul	Board of Directors		
18	McInerney	Maureen	Board of Directors		
19	Mirek	Lori	Board of Directors		
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cont	contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТУРЕ		
20	Nascimento	Daniel	Board of Directors		
21	Pohlman	Jack	Board of Directors		
22	Reyes	Remund	Board of Directors		
23	Renaud	Louis	Board of Directors		
24	Sangiacomo	Jim <b>3</b>	Board of Directors		
25	Smith	Barbara	Board of Directors		
26	Woody	Patrick	Board of Directors		
27	Bowen	Thomas	Board of Directors		
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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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1. FILING INFORMATION	
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
	40
Original	<b>3</b> ,
AMENDMENT DESCRIPTION – Explain reason for amendment	
	<b>9</b> ,
	C,
	<b>'</b> O.

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 NUMBER		
Episcopal Community Services of San Francisco	415-487-3300 ext. 7000		
STREET ADDRESS (including City, State and Zip Code)	EMAIL		
165 8th St., San Francisco, CA 94103			

16	5 8th St., San Francisco, CA 94103					
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6. C	ONTRACT					
	E CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/I	RFP NUMBER			
	<i>→</i>			230412		
DESC	CRIPTION OF AMOUNT OF CONTRACT					
\$2	17,000					
NAT	URE OF THE CONTRACT (Please describe)					
\$2	17,000 - ESG funds for Emergency Shelter Sen	vices (Proje	ect ID: HS	н9)		
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7. 0	DIVINIENTS					
0 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	ТҮРЕ
1	Larra	Eric	CF0
2	Stokes	Beth	CEO
3	Handley Andrus	Marc	Board of Directors
4	Bond	Doug	Board of Directors
5	Clayter	Todd	Board of Directors
6	Geeslin	Keith	Board of Directors
7	Но	Heidi	Board of Directors
8	Jones	Martin	Board of Directors
9	Ketcham	Susan	Board of Directors
10	Martinez	Alejandro	Board of Directors
11	McTiernan	Megan	Board of Directors
12	Metoyer	Eric	Board of Directors
13	Rodriguez	Jonathan	Board of Directors
14	Shah	Таје]	Board of Directors
15	Silveira	Dara	Board of Directors
16	Singer	Susanna	Board of Directors
17	Solomon	Barbara	Board of Directors
18	Springwater	Richard	Board of Directors
19	Tatsuno	Yvonne	Board of Directors

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
20	Zaidi	Hassan	Board of Directors
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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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1. FILING INFORMATION	
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
Original	S.
AMENDMENT DESCRIPTION – Explain reason for amendment	<b>'</b> O
	Y <sub>X</sub>
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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 NUMBER
Hamilton Families	(415) 321-2612 ext. 131
STREET ADDRESS (including City, State and Zip Code)	EMAIL
273 9th St, San Francisco, CA 94103	

27	3 9th St, San Francisco, CA 94103				
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6. C	ONTRACT				
DATI	E CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER		FILE NUMBER (If applicable) 230412	
DESC	CRIPTION OF AMOUNT OF CONTRACT				
\$1	91,943				
NAT	URE OF THE CONTRACT (Please describe)				
\$1	91,943 - ESG Funds for Rapid rehousing for f	amilies (Pr	oject ID:H	SH12)	
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	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 EI ECTIV	/E UEEICED(S) II	DENTIFIED ON THIS FORM SITS	
	THE BOARD OF A STATE AGENCT ON WHICH AN APPOINTEE OF	THE CITY ELECTIV	L OFFICER(3) II	PERMITTED OIN THIS FORIN 3113	

cont	contract.			
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ	
1	виск	Paige	Board of Directors	
2	Bernstein	Ruth	Board of Directors	
3	Basler	Julian	Board of Directors	
4	віоот	Marissa	Board of Directors	
5	Florendo	Lauren	Board of Directors	
6	Goldin	David	Board of Directors	
7	Jackson	Rebecca	Board of Directors	
8	Kurtze	DJ	Board of Directors	
9	Lane	Jessica	Board of Directors	
10	Maidenberg	Ted	Board of Directors	
11	Moreno	Karina	Board of Directors	
12	Boutiette	Dale	Board of Directors	
13	Scott	Mary	Board of Directors	
14	Toland	Susan	Board of Directors	
15	Noon	Kyriell	CEO	
16	Kim	Kenneth	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** 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.

# 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 BOS Clerk of the Board



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Original	03.
AMENDMENT DESCRIPTION – Explain reason for amendment	***
	<b>1</b>
	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 DEPARTMENTAL CONTACT		DEPARTMENT CONTACT TELEPHONE NUMBER
Hanna Blanton		415-701-5500
FULL DEPARTMENT NAME		DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Comm. Dev.	hanna.blanton@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHON	E NUMBER
La Casa de las Madres	415-50	3-0500
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
1269 Howard Street, San Francisco, CA 94103		
6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBE	R FILE NUMBER (If applicable) 230412
DESCRIPTION OF AMOUNT OF CONTRACT		
\$165,000		
NATURE OF THE CONTRACT (Please describe)		
\$165,000 - ESG funds for Emergency shelter se	rvices and case mana	gement (Project ID:HSH14)
	rvices and case mana	
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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 OFFICERS	) IDENTIFIED ON THIS FORM SITS
	on end	,

# LAST NAME/ENTITY/SUBCONTRACTOR FIRST NAME TYPE  1 Black Kathy CEO  2 Zauss Michelle Board of Direct  3 Sanchez Carmen Board of Direct  4 Ortler Carolyn Board of Direct  5 Escson Austin Board of Direct  6 Hale Katie Board of Direct  7 Jolivet Melantie Board of Direct  8 McCurtis Kiesha Board of Direct  9 Miller Creary Betty Board of Direct  10 Steel Shawn Board of Direct  11 Tucker Nanci Board of Direct  12 13	contract.			
Zauss Michelle Board of Direct Sanchez Carmen Board of Direct Carolyn Board of Direct Secson Austin Board of Direct Solve Melantie Board of Direct Melantie Board				
3 Sanchez Carmen Board of Direct 4 Ortler Carolyn Board of Direct 5 Escson Austin Board of Direct 6 Hale Katie Board of Direct 7 Jolivet Melantie Board of Direct 8 McCurtis Kiesha Board of Direct 9 Miller Creary Betty Board of Direct 10 Steel Shawn Board of Direct 11 Tucker Nanci Board of Direct 12 13				
4 Ortler Carolyn Board of Direct Escson Austin Board of Direct Formula   5 Escson Austin Board of Direct Formula   6 Hale Katie Board of Direct Formula   7 Jolivet Melantie Board of Direct Formula   8 McCurtis Kiesha Board of Direct Formula   9 Miller Creary Betty Board of Direct Formula   10 Steel Shawn Board of Direct Formula   11 Tucker Nanci Board of Direct Formula   12   13	ectors			
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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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Original	<b>3</b> ,
AMENDMENT DESCRIPTION – Explain reason for amendment	
	<b>9</b> ,
	C,
	<b>'</b> O.

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
Arata Goto	0	415-701-5500
FULL DEPARTM	IENT NAME	DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Housing & Comm. Dev.	commdevRFP@sfgov.org

5. CONTRACTOR			
NAME OF CONTRACTOR		TELEPHONE N	IUMBER
Larkin Street Youth Services		(415) 67	3-0911
STREET ADDRESS (including City, State and Zip Code)		EMAIL	
134 Golden Gate Ave, San Francisco, CA 94102			
6. CONTRACT			
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/F	RFP NUMBER	FILE NUMBER (If applicable) 230412
			230412
DESCRIPTION OF AMOUNT OF CONTRACT			
\$112,000			
NATURE OF THE CONTRACT (Please describe)			
\$112,000 - ESG funds for Emergency shelter se	rvices and c	ase manag	ement - Project ID:HSH15
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7. COMMENTS			
8. CONTRACT APPROVAL			
This contract was approved by:			
THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM			
A DOADD ON WILLOUT HE CITY OF FATHER OFFICE ASSESSMENT			
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

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
1	Roos	Eric	Board of Directors
2	Shapiro	Sally	Board of Directors
3	Valentine	DV	Board of Directors
4	Moise	Adam	Board of Directors
5	Cameron	Cecily	Board of Directors
6	Elias	Marcie	Board of Directors
7	Grossman	Blake	Board of Directors
8	Obaro	Bambo	Board of Directors
9	Adams	Sherilyn	CEO
10	Barnett	Fiona	Board of Directors
11	Berg	Siri	Board of Directors
12	Brahm	Jennifer	Board of Directors
13	Cohen	Andy	Board of Directors
14	F00	Catherine	Board of Directors
15	Hoecker	Anne	Board of Directors
16	Horn	Tim	Board of Directors
17	Johnson	Eric	Board of Directors
18	Kerzic	Richard	Board of Directors
19	Liss	Patrick	Board of Directors

cont	contract.			
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ	
20	Hatvany Kitchen	Natalie	Board of Directors	
21	Lindner	Marcus	Board of Directors	
22	Matlock	Michael	Board of Directors	
23	Modi	Kunal	Board of Directors	
24	Ogan	Healther	Board of Directors	
25	Perkins	Edward	Board of Directors	
26	Viola	John	Board of Directors	
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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		