

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:⁰⁵⁻⁰¹⁻²⁰²³ | 16:27:22 PDT

File #: 230337

Bid/RFP #: TC79501

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	
Russ Dubk	cin	628-652-1619	
FULL DEPARTMENT NAME		DEPARTMENT CONTACT EMAIL	
ADM	Office of Contract Administration	ruslan.dubkin@sfgov.org	

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
Bay Cities Produce, Inc.	510-772-4943	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
2109 william Street, San Leandro, CA 94577	steve@baycitiesproduce.com	

6. CONTRACT			
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)	
04/25/2023	тс79501	230337	
DESCRIPTION OF AMOUNT OF CONTRACT	I		
\$11,100,000			
NATURE OF THE CONTRACT (Please describe)			
Provide fresh and frozen produce to the Department of Public Health's patients, including its residents at Laguna Honda.			
Original Contract: Not-to-Exceed amount \$4,017,715.43. Modification 1: Not-to-Exceed amount increased to \$6,017,715.43. Modification 2: Not-to-Exceed amount increasing to \$12,067,569.00.			

7. COMMENTS

Description of Amount reflects amendment to reduce in Committee 4/19/2023.

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) 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	Del Masso	Steve	CEO
2	Jennec	Kenneth	Other Principal Officer
3	Vargas	Debbie	CFO
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9. AFFILIATES AND SUBCONTRACTORS

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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:	05-01-2023 16:27:22 PDT