

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: 07-24-2023 | 10:25:03 PDT

File #: 230694

Bid/RFP #: SFGOV-0000008278

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. CONTRACTING DEPARTMENT CONTACT		
NAME OF DE	PARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
нао Хіе		628-652-5166
FULL DEPART	TMENT NAME	DEPARTMENT CONTACT EMAIL
TIS	Department of Technology	hao.xie@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
Zones, LLC	253-545-7318
STREET ADDRESS (including City, State and Zip Code)	EMAIL
1102 15th Street SW, Auburn, WA 98001-6524	sf.ms@zones.com

6. CC	ONTRACT			
DATE	CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	
07	/18/2023	SFGOV-0000	0008278	230694
DESC	CRIPTION OF AMOUNT OF CONTRACT			
No	t to Exceed \$55,000,000			
NATU	JRE OF THE CONTRACT (Please describe)			
c1	e contract is a citywide enterprise agreemen oud computing solutions. The term is for thi 23. The not-to-exceed is \$55 million over t	rty-six (36)) months b	ft software products and eginning September 1,
7. CO	DMMENTS			
	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
$ \sqcup $				

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.

con	tract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ		
1	Lalji	Firoz	CEO		
2	Jiambalvo	James	Board of Directors		
3	Kirkpatrick	Ken	Board of Directors		
4	Bauer	John	Board of Directors		
5	Day	Russel	CF0		
6	наllock	Derrek	C00		
7	Camden	Dominic	Other Principal Officer		
8	Zones IT Solutions, Inc.		Shareholder		
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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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List to	FFILIATES AND SUBCONTRACTORS the names of (A) members of the contract utive officer, chief financial officer, chief of has an ownership interest of 10 percent of ract.	operating officer, or other persons with s	similar titles; (C) any individual or entity
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
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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 ve used all reasonable diligence in prepar	ing this statement. I have reviewed this s	statement and to the best of my

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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 ha	ve used all reasonable diligence in preparing this stateme	nt. I have reviewed this s	tatement and to the best of my			
	wledge the information I have provided here is true and c		·			
	O	- P				
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.						
I ce	rtify under penalty of perjury under the laws of the State	of California that the fo	regoing is true and correct.			
	rtify under penalty of perjury under the laws of the State NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR	of California that the fo	regoing is true and correct.			
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