### FORM SFEC-126:
**NOTIFICATION OF CONTRACT APPROVAL**
(S.F. Campaign and Governmental Conduct Code § 1.126)

#### City Elective Officer Information (Please print clearly.)
<table>
<thead>
<tr>
<th>Name of City elective officer(s):</th>
<th>City elective office(s) held:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Members, Board of Supervisors</td>
<td>Members, Board of Supervisors</td>
</tr>
</tbody>
</table>

#### Contractor Information (Please print clearly.)
| Name of contractor: | State of California, by and through its Department of Transportation |

**Please list the names of**
1. members of the contractor’s board of directors;
2. the contractor’s chief executive officer, chief financial officer and chief operating officer;
3. any person who has an ownership of 20 percent or more in the contractor;
4. any subcontractor listed in the bid or contract; and
5. any political committee sponsored or controlled by the contractor.

*Use additional pages as necessary.*
Governor Edmund G. Brown, Jr.
Debra Bowen, Secretary of State

#### Contractor address:
Department of Transportation
Right of Way Airspace MS 11
P.O. Box 23440
Oakland, CA 94623-0440

<table>
<thead>
<tr>
<th>Date that contract was approved:</th>
<th>Amount of contract:</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>(By the SF Board of Supervisors)</em></td>
<td>$2,335,343 total for a 20 year term</td>
</tr>
</tbody>
</table>

#### Describe the nature of the contract that was approved:
Lease agreement

#### Comments:

This contract was approved by (check applicable):

- [ ] the City elective officer(s) identified on this form
- [x] a board on which the City elective officer(s) serves: **San Francisco Board of Supervisors**

Print Name of Board

- [ ] the board of a state agency (Health Authority, Housing Authority Commission, Industrial Development Authority Board, Parking Authority, Redevelopment Agency Commission, Relocation Appeals Board, Treasure Island Development Authority) on which an appointee of the City elective officer(s) identified on this form sits

Print Name of Board

#### Filer Information (Please print clearly.)
<table>
<thead>
<tr>
<th>Name of filer:</th>
<th>Contact telephone number:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Angela Calvillo, Clerk of the Board</td>
<td>*( 415 ) 554-5184</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address:</th>
<th>E-mail:</th>
</tr>
</thead>
<tbody>
<tr>
<td>City Hall, Room 244, 1 Dr. Carlton B. Goodlett Pl., San Francisco, CA 94102</td>
<td><a href="mailto:Board.of.Supervisors@sfgov.org">Board.of.Supervisors@sfgov.org</a></td>
</tr>
</tbody>
</table>

**Signature of City Elective Officer (if submitted by City elective officer)**  
**Date Signed**

**Signature of Board Secretary or Clerk (if submitted by Board Secretary or Clerk)**  
**Date Signed**