File No._____

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

City Elective Officer Information (*Please print clearly.*)	
Name of City elective officer(s): Members, SF Board of Supervisors	City elective office(s) held: Members, SF Board of Supervisors

Contractor Information (*Please print clearly.*)	
Name of contractor: **Contractors for Department of Public Health State Recurring Grants FY 2012-13**	
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. Please see attached spreadsheet for contractor information	
Contractor address:	
Date that contract was approved:	Amount of contract:
Describe the nature of the contract that was approved:	
Comments:	

This contract was approved by (check applicable):

☐ the City elective officer(s) identified on this form (Mayor, Edwin M. Lee)

☐ a board on which the City elective officer(s) serves __San Francisco Board of Supervisors_____
<div align="center">Print Name of Board</div>

☐ 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

_____
<div align="center">Print Name of Board</div>

Filer Information (*Please print clearly.*)	
Name of filer: Clerk of the Board of Supervisors	Contact telephone number: (415) 554-5184
Address: City Hall, Room 244 1 Dr. Carlton B. Goodlett Place, San Francisco, CA 94102	E-mail: Bos.legislation@sfgov.org

_____   _____
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