

San Francisco Ethics Commission  
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San Francisco, CA 94102  
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For SFEC use

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

**a. Instructions:**

Each City elective officer who approves a contract that has a value of \$50,000 or more in a fiscal year must file this form with the Ethics Commission within five business days of approval. This filing requirement applies if the contract is approved by:

- the City elective officer,
- any board on which the City elective officer serves, or
- the board of any state agency on which an appointee of the City elective officer serves, as described in (d) below.

**b. Who files this notice?**

The City elective officer who approved the contract, whose board approved the contract, or who has an appointee on the board of a state agency that approved the contract, must file this form. However, the City elective officer is not required to file this form if the clerk or secretary of the board on which the officer or appointee serves has filed this form on behalf of the board.

**c. Who is a City elective officer?**

A City Elective Officer is any of the following: Mayor, member of the Board of Supervisors, City Attorney, District Attorney, Treasurer, Sheriff, Assessor, Public Defender, member of the Board of Education of the San Francisco Unified School District, or member of the Governing Board of the San Francisco Community College District.

**d. What is a "board of a state agency" that is covered by this filing requirement?**

For the purposes of this report, the board of a state agency on which an appointee of a City elective officer serves is limited to the following agencies: Health Authority, Housing Authority Commission, Industrial Development Authority Board, Parking Authority, Redevelopment Agency Commission, Relocation Appeals Board, Treasure Island Development Authority, and Local Workforce Investment Board.

**e. Is this form required for all contracts?**

No. This form is required if the contract has a total anticipated or actual value of \$50,000 or more, or a combination or series of such contracts, amendments or modifications approved by the same City elective officer or board has a value of \$50,000 or more in a fiscal year.

**f. What happens after this form is filed?**

For a period of six months after the contract is approved, neither the City elective officer nor any political committee that he or she controls may solicit or accept a campaign contribution from the following persons or entities: the party whose contract was approved; the party's board of directors; the party's chairperson, chief executive officer, chief financial officer, or chief operating officer; any person with an ownership interest of more than 20 percent in the party; any subcontractor listed in the bid or contract; or any political committee sponsored or controlled by the contracting party. Nor may any of these persons make a campaign contribution to the City elective officer, a candidate for the office held by such officer, or a political committee controlled by such officer or candidate.

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<b>City Elective Officer Information</b> <i>(Please print clearly.)</i>	
Name of City elective officer(s): Members, Board of Supervisors	City elective office(s) held: Members, Board of Supervisors

<b>Contractor Information</b> <i>(Please print clearly.)</i>	
Name of contractor: Health Advocates, LLC	
<i>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.</i>	
<b>President:</b> Al Leibovic, <b>CEO</b> Aaron Leibovic, <b>COO</b> , Steve Levine, <b>CFO</b> William Russell	
Contractor address: 14721 Califa Street, Sherman Oaks, CA 91411	
Date that contract was approved:	Amount of contract: \$6,300,390
Describe the nature of the contract that was approved: <ul style="list-style-type: none"><li>• On-site eligibility workers screen all referred unsponsored medical Acute admissions by San Francisco General Hospital Eligibility Staff and all acute Psych admissions for Medi-Cal and other federal, state and local health care programs.</li><li>• Secure authorization to represent the patient and complete Medi-Cal applications and/or any other new federal, state, and local programs, i.e. those under the Affordable Care Act. Including the referrals for undocumented Aliens.</li><li>• Represent the patient in Fair Hearings or all other State or legal appeals proceedings, if applications are denied.</li><li>• Appeal Medi-Cal Field office or other Pre-Treatment Authorization program denials for care.</li><li>• Investigate possible third party liability or Workers Compensation reimbursement. File liens to protect the City and County's interest whenever appropriate or possible.</li><li>• And others.</li></ul>	
Comments:	

This contract was approved by (check applicable):

☐ the City elective officer(s) identified on this form

☒ 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

<b>Filer Information</b> <i>(Please print clearly.)</i>	
Name of filer: Angela Calvillo, Clerk of the Board of Supervisors	Contact telephone number: (415) 554-5184
Address: Room 244, 1 Dr. Carlton B. Goodlett Place, San Francisco, CA 94102	E-mail: Angela.Calvillo@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

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