File No. 150291

## 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):		e office(s) held:
Members, Board of Supervisors	Member	s, Board of Supervisors
Contractor Information (Please print clearly.)		
Name of contractor:		
The Robert J. Cort Marital Trust		
Please list the names of (1) members of the contractor's board of dir financial officer and chief operating officer; (3) any person who has any subcontractor listed in the bid or contract; and (5) any political additional pages as necessary.  1. N/A  2. Vera Cort, Trustee. Successive Trustees are Robert J. Cort, 3. N/A  4. N/A	an ownership committee spo	of 20 percent or more in the contractor; (4) onsored or controlled by the contractor. Use
5. N/A		
Contractor address: Vera Cort, Trustee, 757 3rd Avenue, San Francisco, CA		
Date that contract was approved:	Amount of	contract:
May 5, 2015	Per formula	
Describe the nature of the contract that was approved:	1	
Lease of clinic space for San Francisco Department of Public Health	at 760 Harriso	on St., San Francisco
Comments:		
This contract was approved by (check applicable):  ☐ the City elective officer(s) identified on this form (Mayor, Ed  ☑ a board on which the City elective officer(s) serves San Fran  Pri  ☐ the board of a state agency (Health Authority, Housing Autho Board, Parking Authority, Redevelopment Agency Commission Development Authority) on which an appointee of the City election	cisco Board int Name of Board rity Commis n, Relocation	sion, Industrial Development Authority Appeals Board, Treasure Island
Filer Information (Please print clearly.)	1	
Name of filer: Angela Calvillo, Clerk of the Board of Supervisors		Contact telephone number: (415) 554 - 5184
Address: City Hall, 1 Dr. Carlton B. Goodlett Place Room 244 San Francisco, CA 94102		E-mail: Board.of.supervisors@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