

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

City Elective Officer Information <i>(Please print clearly.)</i>	
Name of City elective officer(s): Members, Board of Supervisors	City elective office(s) held: Members, Board of Supervisors
Contractor Information <i>(Please print clearly.)</i>	
Name of contractor: The Robert J. Cort Marital Trust	
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.	
1. N/A 2. Vera Cort, Trustee. Successive Trustees are Robert J. Cort, Jr., Deborah Cort, Douglas Cort, Daniel Cort 3. N/A 4. N/A 5. N/A	
Contractor address: Vera Cort, Trustee, 757 3rd Avenue, San Francisco, CA	
Date that contract was approved: May 5, 2015	Amount of contract: Per formula
Describe the nature of the contract that was approved: Lease of clinic space for San Francisco Department of Public Health at 760 Harrison St., San Francisco	
Comments:	

This contract was approved by (check applicable):

- the City elective officer(s) identified on this form (Mayor, Edwin Lee)
- 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 <i>(Please print clearly.)</i>	
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



5/8/15

Signature of Board Secretary or Clerk (if submitted by Board Secretary or Clerk)

Date Signed