File No. 160555

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):	City elective office(s) held:
Members, Board of Supervisors	Members, Board of Supervisors
Contractor Information (Please print clearly.)	
Name of contractor: Potrero Housing Associates I, L.P.,	
Please list the names of (1) members of the contractor's board of dirfinancial 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) And 2) Members of the Board of Directors, included title MCB Family Housing Inc, a California nonprofit, public benefit	an ownership of 20 percent or more in the contractor; (4) committee sponsored or controlled by the contractor. Use
Board Directors:	
Cynthia Parker, President	
Ann Silverberg, Vice President	
 Kimberly McKay, Vice President 	
D. Valentine, Chief Financial Officer	
Susan Johnson, Secretary	
Rebecca Hlebasko, Assistant Secretary N/A	
3) N/A 4) N/A	
5) N/A	
Contractor address:	
Potrero Housing Associates I, L.P., 600 California Street, Suite 900,	San Francisco, CA 94108
Date that contract was approved:	Amount of contract: \$0
Describe the nature of the contract that was approved:	
Option to Ground Lease 1101 Connecticut and adjacent parcel (know	yn as "Block X") for the development of 72 affordable
family apartment units, included in HOPE SF Potrero project.	and something the same way of the same of
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 Autho	
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	
bevelopment reactionty) on which an appointed of the enty elec	tive officer(s) racitatives on this form sites
Print Name of Board	
Filer Information (Please print clearly.)	
Name of filer:	Contact telephone number:
Angela Calvillo, Clerk of the Board	(415) 554-5184
Address: City Hall, Room 244, 1 Dr. Carlton B. Goodlett Pl., San Fra	encisco, CA E-mail: Board.of.Supervisors@sfgov.org
Signature of City Elective Officer (if submitted by City elective office	Date Signed
Signature of Board Secretary or Clerk (if submitted by Board Secretar	y or Clerk) Date Signed