File No. 180240

FORM SFEC-126: NOTIFICATION OF CONTRACT APPROVAL

(S.F. Campaign and Governmental Conduct Code § 1.126)

City Elective Officer Information (Please print clearly.)

City Elective Officer Information (Trease print clearty.)	
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:	
Shahina Holdings, LLC	
Please list the names of (1) members of the contractor's board of direct	etors: (2) the contractor's chief executive officer, chief
financial officer and chief operating officer; (3) any person who has a	
any subcontractor listed in the bid or contract; and (5) any political co	
additional pages as necessary.	•
(1) Pravin Patel, Manager/Member; Kiran Patel, Member; Ashok	Patel, Member
(2) N/A	
(3) N/A	
(4) N/A	
(5) N/A	
Contractor address:	
860 Eddy Street; San Francisco, CA 94109	
D.	
Date that contract was approved:	Amount of contract: \$6,168,612.03
(By the SF Board of Supervisors)	
Describe the nature of the contract that was approved:	20/ P ₋ C0/
10-Year contract with Base Rent at \$39,000 per year, escalating between	
Comments: Contract amount assumed to escalate at highest end of 69	6 per year.
This contract was approved by (check applicable):	
□the City elective officer(s) identified on this form	
•	sissa Daard of Currentians
a board on which the City elective officer(s) serves: San Francisco Board of Supervisors Print Name of Board	
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☐ the board of a state agency (Health Authority, Housing Authori	
Board, Parking Authority, Redevelopment Agency Commission, Relocation Appeals Board, Treasure Island	
Development Authority) on which an appointee of the City elect	ve officer(s) identified on this form sits
Print Name of Board	
THE TAX OF COLUMN 1	
Filer Information (Please print clearly.)	
Name of filer:	Contact telephone number:
Angela Calvillo, Clerk of the Board	(415) 554-5184
Address:	E-mail:
City Hall, Room 244, 1 Dr. Carlton B. Goodlett Pl., San Francisco, CA	94102 Board.of.Supervisors@sfgov.org
Signature of City Elective Officer (if submitted by City elective officer	Date Signed
Signature of City Licetive officer (if submitted by City elective officer)	Date Signed
Signature of Board Secretary or Clerk (if submitted by Board Secretary	or Clerk) Date Signed