## 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:	
Raul and Denise Arriaza and The Olson Family Trust	
financial officer and chief operating officer; (3) any person who has	s an ownership of 20 percent or more in the contractor; (4)
Name of City elective office(s) held:  Members, Board of Supervisors  City elective office(s) held:  Members, Board of Supervisors  Contractor Information (Please print clearly.)  Name of contractor:  Raul and Denis Arriaza and The Olson Family 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 (3) any political committee sponsored or controlled by the contractor. Use additional pages as necessary.  (3) Raul Arriaza, Denise Arriaza, Linda Lee Olson, and Carl Edward Olson  Contractor address:  c/o Bernstein Realty, 4248 23rd Street, San Francisco, CA 94114 ATTN: Pablo Tisker  Date that contract was approved: 6/5/2018  Amount of contract:  Initial rent of \$38,070 per month  Describe the nature of the contract that was approved:  Five year Lease renewal for 1305-09 Evans, San Francisco, CA 94124, for the Department of Public Health.  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  a board on which the City elective officer(s) serves: San Francisco Board of Supervisors Print Name of Board  This 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 (Please print clearly.)  Name of filer;  Contact telephone number:  (415) 554-5184  Beard of Supervisors@sigov.org	
	TTN: Pablo Tisker
Date that contract was approved: 6/5/2018	Annabar and the second
Describe the nature of the contract that was annually	
	24 for the Department of Public Health
The year Bease rene war for 1505 by Brand, San Translator, City 112	121, for the Department of Fuone Hearth.
Comments:	
☐ the City elective officer(s) identified on this form ☐ a board on which the City elective officer(s) serves: San Fra  Pri ☐ the board of a state agency (Health Authority, Housing Autho Board, Parking Authority, Redevelopment Agency Commission	ority Commission, Industrial Development Authority on, Relocation Appeals Board, Treasure Island
Development Authority) on which an appointee of the City elec	ective officer(s) identified on this form sits
Print Name of Board	6
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	The second secon
Signature of City Elective Officer (if submitted by City elective office	cer) Date Signed
Peggy New to Angela Calvello COB Signature of Board Secretary or Clerk (if submitted by Board Secretary	ary or Clerk)  Output  Date Signed