FORM SFEC-126: NOTIFICATION OF CONTRACT APPROVAL

((S.F.	Campaign	and Go	vernmental	Conduct	t Code	§	1.1	26

 City Elective Officer Information (Please print clearly.)

 Name of City elective officer(s):
 City elective office(s) held:

 Members, SF Board of Supervisors
 Members, SF Board of Supervisors

Contractor Information (Please print clearly.)

Name of contractor:

Various Contractors for Department of Public Health State Recurring Grants FY 2018-2019

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.

Please see attached spreadsheet for contractor information

Contractor address: Various, See attached.								
Date that contract was approved:	Amount of contract: Various, See attached.							
Describe the nature of the contract that was approved:								
Recurring State grant funds to various agencies for FY2018-2019.								
Recurring State grant funds to various agenetes for 1 12010 2017.								
Comments:								

This contract was approved by (check applicable):

□ the City elective officer(s) identified on this form (Mayor, Mark Farrell)

X 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 (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	Board.of.Supervisors@sfgov.org			
1 Dr. Carlton B. Goodlett Place, San Francisco, CA 94102				

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