

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

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|---|---|
| <b>City Elective Officer Information</b> <i>(Please print clearly.)</i> |   |
| Name of City elective officer(s):<br>Member, Board of Supervisors       | City elective office(s) held:<br>Member, Board of Supervisors |

|   |                                 |
|---|---------------------------------|
| <b>Contractor Information</b> <i>(Please print clearly.)</i>  |                                 |
| Name of contractor:<br>APA Family Support Services  |                                 |
| <i>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.</i>                              |                                 |
| (1) Chair, Rose Chung, President, Cary Chen, Vice President, Jacqueline Huie, Secretary, Julie Hoxie, Treasurer, Joyce Tso, CPA/ABV, Mai-Sie Chan, M.D., Van Diep, Stephen Koh, CLF, Fanny Lam, Kory Lam, Susan Sung, Ph.D., Dean Yao, Ph.D., Rick Yuen<br>(2) Executive Director: Amor Santiago, DPM, MPH<br>(3) (4) (5) Not applicable.   |                                 |
| Contractor address: 3801 Third Street, Ste. 610, San Francisco, CA, 94124   |                                 |
| Date that contract was approved:  | Amount of contract:<br>\$65,000 |
| Describe the nature of the contract that was approved: As part of the Domestic Violence High Risk Program funded by the U.S. Department of Justice Office of Violence Against Women, APA Family Support Services will be responsible for providing trained staff to the Project Team and participate fully in the implementation of the grant, including conducting targeted outreach as well as technical assistance, and support for domestic violence survivors. |                                 |
| Comments: None.   |                                 |

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 Authority Commission, Industrial Development Authority Board, Parking Authority, Relocation Appeals Board, and Local Workforce Investment Board) on which an appointee of the City elective officer(s) identified on this form sits

\_\_\_\_\_  
Print Name of Board

|   |   |
|---|---|
| <b>Filer Information</b> <i>(Please print clearly.)</i>                                 |   |
| Name of filer:<br>Angela Calvillo, Clerk of the Board                                   | Contact telephone number:<br>( 415 ) 554-5184 |
| Address:<br>City Hall, Room 244, 1 Dr. Carlton B. Goodlett Pl., San Francisco, CA 94102 | E-mail:<br>Board.of.Supervisors@sfgov.org     |

\_\_\_\_\_  
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