FORM SFEC-126: NOTIFICATION OF CONTRACT APPROVAL

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

(S.F. Campaign and Governmen	ital Colluder Code § 1.120)
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:	
SFP2 1360 Mission St, LLC	
Please list the names of	
(1) Managing Member: Michael Wang	***
(3) any person who has an ownership of 20 percent or more in the (4) any subcontractor listed in the bid or contract: No	contractor: Wang Li, Jui-Ying
(4) any subcontractor tisted in the bid or contract: No (5) any political committee sponsored or controlled by the contractor: No	
(3) any pointed commutee sponsored or controlled by the contract	. <u>110</u>
Contractor address:	
1720 El Camino Real, Ste 101A, Burlingame, CA 94010	
Date that contract was approved: March 12, 2019	Amount of contracts:
But that contract was approved. Haren 12, 2019	\$26,397/month, or \$321,300
Describe the nature of the contract that was approved:	7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 -
Lease Agreement	
Comments:	
Current Lease was expired on 09/01/2018, while a Lease LOI was	accepted and signed on 05/04/2018.
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 F	ranaisee Board of Supervisors
	Print Name of Board
☐ the board of a state agency (Health Authority, Housing Auth	
Board, Parking Authority, Redevelopment Agency Commissi	*
Development Authority) on which an appointee of the City el	
7,	
Print Name of Board	
Filer Information (Please print clearly.)	
Name of filer: Angela Calvillo, Clerk of the Board	Contact telephone number:
	(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 off	icer) Date Signed
1 -0 Call	7/10/0
Signature of Board Secretary or Clerk (if submitted by Board Secre	tary or Clerk) Date Signed
Signature of Doald Scordary of Clerk Hi Submitted by Board Secre	tary of Cicik) Date Signed