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, San Francisco Board of Supervisors Members, San Francisco Board of Supervisors **Contractor Information** (*Please print clearly.*) Name of contractor: HealthRIGHT 360 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. 1. Trisha Walsh, Board Chair; James McElwee, Board Vice Chair; Brian B.C.I. Graham, Board Secretary; Yener Balan; Deborah Koski; Barbara Kostick; Jemma Lavarias; Anji Mandavia; Ann McClanathan; Melyssa Mendoza; Paul Pitts; Karen E. Pointer: Ramona Shewl 2. Vitka Eisen, CEO; Tony Duong, CFO; Jegan Anandasakaran, CIO; Ana Vales, Chief Healthcare Officer; Demetrius Andreas, VP, Community and Aftercare Programs; Jack Cheng, VP of Healthcare Services; Rachel Cusick, VP of Development; Leo D'Agostino, VP of Human Resources; Wane Garcia, VP of Programs; Mardell Gavriel, VP of Mental Health Services; Dave Otto, Deputy Medical Officer; Densie Williams, VP of Corporate Compliance; April Wilson, VP of Behavioral Health, Southern California 3.Persons with more than 20% ownership: N/A (nonprofit) 4. Subcontractors listed in contract: N/A 5. Political committees sponsored or controlled by contractor: N/A Contractor address: 1735 Mission Street, San Francisco, CA 94103 Date that contract was approved: Amount of contract: \$100,947,391 Describe the nature of the contract that was approved: Fiscal intermediary check writing services Comments: This contract was approved by (check applicable): \Box 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, 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 | |
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| Filer Information (<i>Please print clearly.</i>) | |
| Name of filer: Angela Calvillo, Clerk of the Board | Contact telephone number: (415) 554-5184 |
| Address: City Hall, Room 244. 1 Dr. Carlton B. Goodlett Pl., San Francisco, CA 94102 | E-mail: 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