File No. 190768

FORM SFEC-126: NOTIFICATION OF CONTRACT APPROVAL

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

City Elective Officer Information (Ple	ase 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:			
Public Health Foundation Enterprises, Inc. dba Heluna Health			
Please list the names of			
1) members of the contractor's board of directors (also attached)			
Erik D. Ramanathan, Chair Alexander Baker, Member			
Delvecchio Finley, Vice Chair	Georgia Casciato, Member		
Robert Jenks, Treasurer	Susan De Santi, Member		
Tamara Joseph, Secretary			
cott Filer, Member Clarence Lam, Member			
Von Nguyen, Member Jean O'Connor, Member			
Sarah Mullen Rich, Member Santosh Vetticaden, Member			
Edward Yip, Member			
(2) the contractor's chief executive officer, chief financial officer and chief operating officer; Chief Executive Officer- Dr. Blayne Cutler Chief Finance Officer- Mr. Brian Gieseler Chief Program Officer- Mr. Peter Dale			
Chief Frogram Officer Wit. Feter Bare			
(3) any person who has an ownership of 20 percent or more in the contractor; N/A			
(4) any subcontractor listed in the bid or contract; and			
People Ready			
Community Payee Partnership			
(5) any political committee sponsored or controlled by the contractor. Use additional pages as necessary.			
N/A			
Contractor address:	of Industry CA 01746		
13300 N/Crossroads Parkway #450 City of Industry, CA 91746			
Date that contract was approved:		Amount of contract: \$39,133,942	
(By the SF Board of Supervisors)			
Describe the nature of the contract that was approved: The agreement is to provide comprehensive outreach and case			
management programming to meet the needs of people experiencing homelessness in San Francisco.			
Comment			
Comments:			
This contract was approved by (check a	applicable):		
☐ the City elective officer(s) identified on this form			

Print Name of Board

X a board on which the City elective officer(s) serves: <u>Board of Supervisors</u>

□ the board of a state agency (Health Authority, Housing Authority Comm Board, Parking Authority, Redevelopment Agency Commission, Relocati Development Authority) on which an appointee of the City elective office	on Appeals Board, Treasure Island
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: 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 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