



**San Francisco Ethics Commission**

25 Van Ness Avenue, Suite 220, San Francisco, CA 94102  
 Phone: 415.252.3100 . Fax: 415.252.3112  
[ethics.commission@sfgov.org](mailto:ethics.commission@sfgov.org) . [www.sfethics.org](http://www.sfethics.org)

Received On:

File #:  
190981

Bid/RFP #:

**Notification of Contract Approval**

SFEC Form 126(f)4  
 (S.F. Campaign and Governmental Conduct Code § 1.126(f)4)  
 A Public Document

Each City elective officer who approves a contract that has a total anticipated or actual value of \$100,000 or more must file this form with the Ethics Commission within five business days of approval by: (a) the City elective officer, (b) any board on which the City elective officer serves, or (c) the board of any state agency on which an appointee of the City elective officer serves. For more information, see: <https://sfethics.org/compliance/city-officers/contract-approval-city-officers>

1. FILING INFORMATION	
<b>TYPE OF FILING</b>	<b>DATE OF ORIGINAL FILING (for amendment only)</b>
Original	
<b>AMENDMENT DESCRIPTION – Explain reason for amendment</b>	

2. CITY ELECTIVE OFFICE OR BOARD	
<b>OFFICE OR BOARD</b>	<b>NAME OF CITY ELECTIVE OFFICER</b>
Board of Supervisors	Members

3. FILER'S CONTACT	
<b>NAME OF FILER'S CONTACT</b>	<b>TELEPHONE NUMBER</b>
Angela Calvillo	415-554-5184
<b>FULL DEPARTMENT NAME</b>	<b>EMAIL</b>
office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT	
<b>NAME OF DEPARTMENTAL CONTACT</b>	<b>DEPARTMENT CONTACT TELEPHONE NUMBER</b>
Victor wai Ho Lim	415-558-2712
<b>FULL DEPARTMENT NAME</b>	<b>DEPARTMENT CONTACT EMAIL</b>
DEM Department of Emergency Management	Victor.Lim@sfgov.org

5. CONTRACTOR	
<b>NAME OF CONTRACTOR</b> Tiburon, Inc.	<b>TELEPHONE NUMBER</b> 800-727-8088
<b>STREET ADDRESS (including City, State and Zip Code)</b> 6200 Stoneridge Mall Rd, Ste 400, Pleasanton, CA 94588	<b>EMAIL</b>

6. CONTRACT		
<b>DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)</b>	<b>ORIGINAL BID/RFP NUMBER</b>	<b>FILE NUMBER (If applicable)</b> 190981
<b>DESCRIPTION OF AMOUNT OF CONTRACT</b> \$7,153,056		
<b>NATURE OF THE CONTRACT (Please describe)</b> For the joint implementation of a Computer Aided Dispatch System and Fire Station Alerting System to provide 9-1-1 dispatching services for San Francisco.		

7. COMMENTS

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

**9. AFFILIATES AND SUBCONTRACTORS**

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Angove	Simon	CEO
2	Atre	Jatin	Other Principal Officer
3	Davidson	Jeff	COO
4	Pulling	John	Other Principal Officer
5	Seoane	Steve	Other Principal Officer
6	Owens	Doug	CFO
7	TriTech Software Corp.		Shareholder
8	TriTech Software Systems		Shareholder
9	Palmero Finance Corp.		Shareholder
10	BCPE Burgundy Holdings, Inc.		Shareholder
11	BCPE Burgundy Topco, Inc		Shareholder
12	CentralSquare Technologies, LLC		Shareholder
13	SuperMoose Holdco, LLC		Shareholder
14	VEPF SuperMoose Holdings, LLC		Shareholder
15	Bain Capital Fund XII, L.P.,		Shareholder
16	Loring	Ian	Board of Directors
17	Abrahamson	Darren	Board of Directors
18	Scherer	Jeff	Board of Directors
19	Fusco	Mark	Board of Directors

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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
20	Sheth	Brian N.	Board of Directors
21	Teillon	Marc V.	Board of Directors
22	Alonso	Adrian R.	Board of Directors
23	Hung	Betty	Board of Directors
24	Angove	Simon	Board of Directors
25	Evans	Bill	Board of Directors
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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Check this box if you need to include additional names. Please submit a separate form with complete information. Select “Supplemental” for filing type.

**10. VERIFICATION**

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

**I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.**

<p><b>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</b></p>  <p>BOS Clerk of the Board</p>	<p><b>DATE SIGNED</b></p>
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