

25 Van Ness Avenue, Suite 220, San Francisco, CA 94102 Phone: 415.252.3100 . Fax: 415.252.3112 ethics.commission@sfgov.org . www.sfethics.org

Received On:

File #: 200462

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: <a href="https://sfethics.org/compliance/city-officers/contract-approval-city-officers">https://sfethics.org/compliance/city-officers</a>

1. FILING INFORMATION	3
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
	40
Original	<b>3</b> ,
AMENDMENT DESCRIPTION – Explain reason for amendment	
	<b>9</b> ,
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	Ψ.

2. CITY ELECTIVE OFFICE OR BOARD		
OFFICE OR BOARD NAME OF CITY ELECTIVE OFFICER		
Board of Supervisors	Members	

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

4. CONTRACTING DEPARTMENT CONTACT			
NAME OF DEPA	RTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER	
Michael King		415-701-4228	
FULL DEPARTMENT NAME		DEPARTMENT CONTACT EMAIL	
MYR	Mayor's Office of Housing and Comm Dev	michael.king@sfgov.org	

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
Catholic Charities CYO of the Archdiocese of SF	415-972-1211
STREET ADDRESS (including City, State and Zip Code)	EMAIL
990 Eddy Street, San Francisco, CA 94109	jmeneses@CatholicCharitiesSF.org

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6. CONTRACT			
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/R	RFP NUMBER	FILE NUMBER (If applicable) 200462
DESCRIPTION OF AMOUNT OF CONTRACT			
\$212,943			
NATURE OF THE CONTRACT (Please describe)	2		
ESG grant for homelessness prevention services	50		
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			<u>Q</u>
7. COMMENTS			
8. CONTRACT APPROVAL			
This contract was approved by:			
THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM			
A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES			
□□ Board of Supervisors			
THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF	THE CITY ELECTIVE	E OFFICER(S) II	DENTIFIED ON THIS FORM SITS

cont	contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ		
1	Molinelli	Stephen	Board of Directors		
2	McEligot	Kathleen	Board of Directors		
3	McCarthy Allen	Sharon	Board of Directors		
4	Bennett	Paula	Board of Directors		
5	Boerio	Joe	Board of Directors		
6	Borromeo	Theodore	Board of Directors		
7	Brigham	Martha	Board of Directors		
8	Bullian	Gregory	Board of Directors		
9	Cardinal	Kathleen	Board of Directors		
10	Conners	Timothy	Board of Directors		
11	Gelt	Jerilyn	Board of Directors		
12	Grogan	Kathleen	Board of Directors		
13	Hultman	David	Board of Directors		
14	Kane	Steven	Board of Directors		
15	Kostelni	Hugo	Board of Directors		
16	Leupp	Jay Paul	Board of Directors		
17	Markus	Maura	Board of Directors		
18	McGrath	Robert	Board of Directors		
19	McInerney	Maureen	Board of Directors		

contract.			
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
20	Mirek	Lori	Board of Directors
21	Regan	D. Paul	Board of Directors
22	Selfridge	Mike	Board of Directors
23	Sundby	George	Board of Directors
24	Theodore	Pierre	Board of Directors
25	Westray	Kenneth	Board of Directors
26	Whitney	Lori	Board of Directors
27	Wilch	Peter	Board of Directors
28	Cordileone	Salvatore	Board of Directors
29	Miller	Ann Gray	Board of Directors
30	Foedisch	Herbert	Board of Directors
31	Pautler	Michael	Board of Directors
32	Meneses	Jilma	CE0
33	Spindle	Keith	CF0
34			
35			
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# 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 39 40 41 42 43 44 45 46 47 48 49 50 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 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. SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK BOS Clerk of the Board



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1. FILING INFORMATION	3
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
	40
Original	0,,
AMENDMENT DESCRIPTION – Explain reason for amendment	10
	<b>1</b>
	X

2. CITY ELECTIVE OFFICE OR BOARD		
OFFICE OR BOARD NAME OF CITY ELECTIVE OFFICER		
Board of Supervisors	Members	

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

4. CONTRACTING DEPARTMENT CONTACT			
NAME OF DEPARTMENTAL CONTACT		DEPARTMENT CONTACT TELEPHONE NUMBER	
Michael King		415-701-4228	
FULL DEPARTM	ENT NAME	DEPARTMENT CONTACT EMAIL	
MYR	Mayor's Office of Housing and Comm Dev	michael.king@sfgov.org	

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
Central City Hospitality House	415-749-2100
STREET ADDRESS (including City, State and Zip Code)	EMAIL
290 Turk Street, San Francisco, CA 94102	jwilson@hospitalityhouse.org

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6. CONTRACT	<b>A</b>		
DATE CONTRACT WAS APPROVED BY THE	CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBE	
			200462
	40		
DESCRIPTION OF AMOUNT OF CONTRACT			•
\$73,000	· CV		
\$75,000	<b>7.</b> 3°		
NATURE OF THE CONTRACT (Please descri	ibe)		
ESG grant for emergency she	₹ lter essential serv	rices	
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7. COMMENTS			
7. COMMENTS			
8. CONTRACT APPROVAL			
This contract was approved by:			
THE CITY ELECTIVE OFFICER(S) IDEN	TIFIED ON THIS FORM		
A BOARD ON WHICH THE CITY ELECT	TIVE OFFICER(S) SERVES		
Board of Supervisors			
THE BOARD OF A STATE AGENCY ON	WHICH AN APPOINTEE OF	THE CITY ELECTIVE OFFICER(S	S) IDENTIFIED ON THIS FORM SITS
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cont	contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ		
1	Bunker	Jeanie	Board of Directors		
2	Rocchio	Maria	Board of Directors		
3	Cerutti	Brandon	Board of Directors		
4	Rodrigues	Jason	Board of Directors		
5	Hampton	Michael	Board of Directors		
6	Johnson	Jesse	Board of Directors		
7	Zmuda	Monique	Board of Directors		
8	нlad	Daniel	Board of Directors		
9	Cutler	Kelly	Board of Directors		
10	Go	Elaine	Board of Directors		
11	Quinn	Dana Isaac	Board of Directors		
12	Sirinumas	Tan	Board of Directors		
13	D'Orazio	Marissa	Board of Directors		
14	Wilson	Joseph	CEO		
15					
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
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# 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 39 40 41 42 43 44 45 46 47 48 49 50 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 com	nplete.	
I certify under penalty of perjury under the laws of the State of	f California that the foregoing is true and correct.	
SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR DATE SIGNED		
CLERK		
BOS Clerk of the Board		



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1. FILING INFORMATION	3
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
	40
Original	0,,
AMENDMENT DESCRIPTION – Explain reason for amendment	10
	<b>1</b>
	X

2. CITY ELECTIVE OFFICE OR BOARD		
OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER	
Board of Supervisors	Members	

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

4. CONTRACTING DEPARTMENT CONTACT		
NAME OF DEPARTMENTAL CONTACT		DEPARTMENT CONTACT TELEPHONE NUMBER
Michael Ki	ing	415-701-4228
FULL DEPARTME	ENT NAME	DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Housing and Comm Dev	michael.king@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
Community Awareness & Treatment Services, Inc.	415-241-1184
STREET ADDRESS (including City, State and Zip Code)	EMAIL
1171 Mission Street, San Francisco, CA 94103	Kara.Zordel@catsinc.org

6. CC	DNTRACT		
	CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
	<b>A</b>		200462
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DESC	RIPTION OF AMOUNT OF CONTRACT		
<b>*</b> -	5 000		
\$5	5,000		
NATU	JRE OF THE CONTRACT (Please describe)		
ES	G grant for emergency shelter essential serv	ices	
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7. CC	DMMENTS		
8.00	ONTRACT APPROVAL		
	contract was approved by:		
11113	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM		
	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM		
	A DO ADD ON WHICH THE CITY ELECTIVE OFFICED(C) CEDVEC		
	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES		
	Board of Supervisors		
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	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF	THE CITY ELECTIVE OFFICER(S)	IDENTIFIED ON THIS FORM SITS

contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТУРЕ	
1	Finetti	Roderick	Board of Directors	
2	Minot	John	Board of Directors	
3	Johnson	Todd	Board of Directors	
4	Benton	Raymond	Board of Directors	
5	del Castillo	Marta	Board of Directors	
6	Truglio	Chris	Board of Directors	
7	Burns	Rena	Board of Directors	
8	Xu	Jichao	Board of Directors	
9	Zordel	Kara	CEO	
10	Uselman	John	CF0	
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ		
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# DocuSign Envelope ID: EF33C3EE-C54F-4B11-9BD1-5786D6A343EA 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 39 40 41 42 43 44 45 46 47 48

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.			
SIGN	IATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR RK	DATE SIGNED	
	BOS Clerk of the Board		

Check this box if you need to include additional names. Please submit a separate form with complete information.

Select "Supplemental" for filing type.



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1. FILING INFORMATION	3
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
	40
Original	<b>3</b> ,
AMENDMENT DESCRIPTION – Explain reason for amendment	
	<b>9</b> ,
	C,
	Ψ.

2. CITY ELECTIVE OFFICE OR BOARD	
OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

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

4. CONTRACTING DEPARTMENT CONTACT		
NAME OF DEPARTMENTAL CONTACT		DEPARTMENT CONTACT TELEPHONE NUMBER
Michael King		415-701-4228
FULL DEPARTMENT NAME		DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Housing and Comm Dev	michael.king@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
Compass Family Services	415-644-0504	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
37 Grove Street, San Francisco, CA 94102	ekisch@compass-sf.org	
	<u> </u>	

37 Grove Street, San Francisco, CA 94102		ekischwc	ompass-st.org	
6. CONTRACT				
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (If applicable)	
			200462	
DESCRIPTION OF AMOUNT OF CONTRACT				
\$149,944				
NATURE OF THE CONTRACT (Please describe)	•			
\$96,000 ESG grant for emergency shelter essent	tial service	ς		
\$53,944 ESG grant for homelessness prevention	services	3		
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			<u>Q</u>	
7. COMMENTS				
7. COMMENTS				
8. CONTRACT APPROVAL				
This contract was approved by:				
THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM				
A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES				
Board of Supervisors				
THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF	THE CITY ELECTIV	/E OEEICED/S/ II	DENTIFIED ON THIS FORM SITS	
THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF	THE CITY ELECTIV	TE OFFICER(3)	DEINITIED OIN THIS FORIN 3113	
—				

cont	contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ		
1	Wagner	Christopher	Board of Directors		
2	Enge1	Alison	Board of Directors		
3	Daoro	Robert	Board of Directors		
4	Goelz	Doug	Board of Directors		
5	Cain	Jeff	Board of Directors		
6	Dyer	Chad	Board of Directors		
7	Field	Nancy	Board of Directors		
8	Gibbons	Dennis	Board of Directors		
9	Harris	Meghan	Board of Directors		
10	McCarthy	Michael	Board of Directors		
11	McInerney	Brian	Board of Directors		
12	Moatz	Krista	Board of Directors		
13	Moffet	Tim	Board of Directors		
14	Odyniec	Lisa	Board of Directors		
15	Parrish	Anne	Board of Directors		
16	Severt	Laurel	Board of Directors		
17	Christie	Jennifer	Board of Directors		
18	Traina	Katie	Board of Directors		
19	Zeppa	Stephanie	Board of Directors		

cont	tract.		
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
20	Dinkelspiel	Steven	Board of Directors
21	Garcia Houts	Valerie	Board of Directors
22	Issanda	Carine	Board of Directors
23	Kowal	Lauren	Board of Directors
24	Matthews	Ashara	Board of Directors
25	Tait	Adam	Board of Directors
26	Kisch	Erica	CEO
27			۶ <u>۲,</u>
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1. FILING INFORMATION	3
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
Original	v,
AMENDMENT DESCRIPTION – Explain reason for amendment	0

2. CITY ELECTIVE OFFICE OR BOARD	
OFFICE OR BOARD NAME OF CITY ELECTIVE OFFICER	
Board of Supervisors	Members

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

4. CONTRACTING DEPARTMENT CONTACT		
NAME OF DEPA	RTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Michael Ki	ing	415-701-4228
FULL DEPARTM	ENT NAME	DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Housing and Comm Dev	michael.king@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
Dolores Street Community Services, Inc.	415-282-6209
STREET ADDRESS (including City, State and Zip Code)	EMAIL
938 Valencia Street, San Francisco, CA 94110	laura@dscs.org

C <sub>-</sub>			
6. CONTRACT	<u> </u>		
DATE CONTRACT WAS APPROVED BY TH	HE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	
			200462
	40		
DESCRIPTION OF AMOUNT OF CONTRAC	СТ		
\$55,000	93.		
NATURE OF THE CONTRACT (Please desc	cribe)		
ESG grant for emergency sh	elter essential serv	ices	
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7. COMMENTS			
8. CONTRACT APPROVAL			
This contract was approved by:			
THE CITY ELECTIVE OFFICER(S) IDE	NTIFIED ON THIS FORM		
A ROADD ON WILLOUT THE CITY ST	CTIVE OFFICED(C) CERVICO		
A BOARD ON WHICH THE CITY ELE	CLIVE OFFICER(S) SERVES		
☐ Board of Supervisors			
THE BOARD OF A STATE AGENCY (	ON WHICH AN APPOINTEE OF	THE CITY ELECTIVE OFFICER(S)	IDENTIFIED ON THIS FORM SITS
🗆			

1 F	AST NAME/ENTITY/SUBCONTRACTOR Regan Avila Leonard-Wookey Beinart	Monica  Rocio  Anat  Amy	Board of Directors  Board of Directors  Board of Directors
2 A	Avila Leonard-Wookey	Rocio	Board of Directors
3 l	Leonard-Wookey	Anat	
		.0,	Board of Directors
4 E	Beinart	Amy	
			Board of Directors
5 V	winn	Michael	Board of Directors
6 E	Bhakta	Chirag	Board of Directors
7 l	Lauderback	Justine	Board of Directors
8 1	Penfold	Ward	Board of Directors
9 \	valdez	Laura	CEO
10	Jeffrys	Mason	CF0
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cont	contract.		
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
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# 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 39 40 41 42 43 44 45 46 47 48 49 50 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.		
SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED	
BOS Clerk of the Board		



25 Van Ness Avenue, Suite 220, San Francisco, CA 94102 Phone: 415.252.3100 . Fax: 415.252.3112 ethics.commission@sfgov.org . www.sfethics.org

Received On:

File #: 200462

Bid/RFP #:

1

# **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: <a href="https://sfethics.org/compliance/city-officers/contract-approval-city-officers">https://sfethics.org/compliance/city-officers</a>

1. FILING INFORMATION	3
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
	40
Original	<b>3</b> ,
AMENDMENT DESCRIPTION – Explain reason for amendment	
	<b>9</b> ,
	C,
	Ψ.

2. CITY ELECTIVE OFFICE OR BOARD	
OFFICE OR BOARD NAME OF CITY ELECTIVE OFFICER	
Board of Supervisors	Members

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

4. CONTRACTING DEPARTMENT CONTACT		
NAME OF DEPA	RTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Michael Ki	ing	415-701-4228
FULL DEPARTME	ENT NAME	DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Housing and Comm Dev	michael.king@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
Episcopal Community Services of San Francisco	415-487-3300
STREET ADDRESS (including City, State and Zip Code)	EMAIL
165 8th Street, 3rd Floor, San Francisco, CA 94103	Bstokes@ecs-sf.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	
<b>△</b>		200462
DESCRIPTION OF AMOUNT OF CONTRACT		
\$142,943		
NATURE OF THE CONTRACT (Please describe)		
\$89,000 ESG grant for emergency shelter operat	zions	
\$53,943 ESG grant for rapid rehousing services	,	
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	W <sub>X</sub>	
	Y	<b>A</b>
		`@
7. COMMENTS		
8. CONTRACT APPROVAL		
This contract was approved by:		
THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM		
A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES		
□□ Board of Supervisors		
THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF	THE CITY ELECTIVE OFFICER(S)	DENTIFIED ON THIS FORM SITS

cont	contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ		
1	Leong	Gordon	Board of Directors		
2	Tatsuno	Yvonne	Board of Directors		
3	Clark-King	Ellen	Board of Directors		
4	Clayter	Todd	Board of Directors		
5	Geeslin	Keith	Board of Directors		
6	Gill	Richard	Board of Directors		
7	Dienst	Sedge	Board of Directors		
8	Jones	Martin	Board of Directors		
9	Кпарр	Frederic	Board of Directors		
10	Mouton-Patterson	Rita	Board of Directors		
11	Ketcham	Susan	Board of Directors		
12	Robershotte	Megan	Board of Directors		
13	Singer	Susanna	Board of Directors		
14	Springwater	Richard	Board of Directors		
15	Kirby Brooks	Todd	Board of Directors		
16	Zaidi	S. Hassan	Board of Directors		
17	Andrus	Marc Handley	Board of Directors		
18	Stokes	Beth	CEO		
19	Larra	Eric	CF0		

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
20	Callandrillo	Christopher	C00
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# 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 39 40 41 42 43 44 45 46 47 48 49 50 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	f California that the foregoing is true and correct.	
SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED	
BOS Clerk of the Board		



25 Van Ness Avenue, Suite 220, San Francisco, CA 94102 Phone: 415.252.3100 . Fax: 415.252.3112 ethics.commission@sfgov.org . www.sfethics.org

Received On:

File #: 200462

1

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: <a href="https://sfethics.org/compliance/city-officers/contract-approval-city-officers">https://sfethics.org/compliance/city-officers/contract-approval-city-officers</a>

1. FILING INFORMATION	3
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
	40
Original	<b>3</b> ,
AMENDMENT DESCRIPTION – Explain reason for amendment	
	<b>9</b> ,
	C,
	Ψ.

2. CITY ELECTIVE OFFICE OR BOARD		
OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER	
Board of Supervisors	Members	

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

4. CONTRACTING DEPARTMENT CONTACT		
NAME OF DEPAI	RTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Michael Ki	ing	415-701-4228
FULL DEPARTME	ENT NAME	DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Housing and Comm Dev	michael.king@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
Hamilton Families	415-409-2100
STREET ADDRESS (including City, State and Zip Code)	EMAIL
1631 Hayes Street, San Francisco, CA 94117	tmoss@hamiltonfamilies.org

6. CC	DNTRACT		
DATE	CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBI	
	<b>△</b>		200462
DESC	RIPTION OF AMOUNT OF CONTRACT		
\$2	46,943		
NATU	JRE OF THE CONTRACT (Please describe)		
\$5	5,000 ESG grant for emergency shelter essent	ial services	
\$1	91,943 ESG grant for rapid rehousing service		
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7. CC	DMMENTS		
	ONTRACT APPROVAL		
This	contract was approved by:		
	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM		
	A BOARD ON WILLOUTHE CITY FLECTIVE OFFICED(S) CERVICE		
X	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES		
	Board of Supervisors		
	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF	THE CITY ELECTIVE OFFICER	S) IDENTIFIED ON THIS FORM SITS
		diri energia di ilang	.,

COIII	contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ		
1	Smudsky	Clay	Board of Directors		
2	Menjivar	Salvador	Board of Directors		
3	Picazo	Rene	Board of Directors		
4	Mendell	Jason	Board of Directors		
5	Goldin	David	Board of Directors		
6	Groeger	Elizabeth	Board of Directors		
7	Scott	Mary	Board of Directors		
8	Boyette	Marsha	Board of Directors		
9	Banducci	Lea	Board of Directors		
10	Basler	Julian	Board of Directors		
11	Iannuccillo	Ann	Board of Directors		
12	Lue	Tom	Board of Directors		
13	Moss	Tomiquia	CEO		
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cont	contract.			
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ	
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# 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 39 40 41 42 43 44 45 46 47 48 49 50 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.		
SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR	DATE SIGNED	
CLERK		
BOS Clerk of the Board		



25 Van Ness Avenue, Suite 220, San Francisco, CA 94102 Phone: 415.252.3100 . Fax: 415.252.3112 ethics.commission@sfgov.org . www.sfethics.org

Received On:

File #: 200462

1

Bid/RFP #:

# **Notification of Contract Approval**

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

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1. FILING INFORMATION	30
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
	40
Original	<b>3</b> ,
AMENDMENT DESCRIPTION – Explain reason for amendment	
	<b>9</b> ,
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	Ψ.

2. CITY ELECTIVE OFFICE OR BOARD		
OFFICE OR BOARD NAME OF CITY ELECTIVE OFFICER		
Board of Supervisors	Members	

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

4. CONTRACTING DEPARTMENT CONTACT		
NAME OF DEPA	RTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Michael Ki	ing	415-701-4228
FULL DEPARTMI	ENT NAME	DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Housing and Comm Dev	michael.king@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
Homeless Children's Network	415-437-3990
STREET ADDRESS (including City, State and Zip Code)	EMAIL
3450 3rd Street, San Francisco, CA 94124	april@hcnkids.org

54	3450 3rd Street, San Francisco, CA 94124		aprilenchklas.org	
6. C	ONTRACT			
DATI	CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (If applicable)
				200462
DESC	CRIPTION OF AMOUNT OF CONTRACT			
\$5	5,000			
NAT	URE OF THE CONTRACT (Please describe)			
ES	G grant for emergency shelter essential serv	rices		
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8. C	ONTRACT APPROVAL			
This	contract was approved by:			
	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM			
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	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES			
$  \Box  $	Board of Supervisors			
$ \Box $	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF	THE CITY ELECTIV	/E OFFICER(S) I	DENTIFIED ON THIS FORM SITS
$  \Box  $				

con	contract.					
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ			
1	Bernardin	Alex	Board of Directors			
2	Nwokah	Zibbie	Board of Directors			
3	Remington	Elena	Board of Directors			
4	Puri	Amar	Board of Directors			
5	Smith	Shannon	Board of Directors			
6	Schindler	Pauline	Board of Directors			
7	Etheart	Sharika	Board of Directors			
8	Silas	April	CEO			
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ	
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## 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 39 40 41 42 43 44 45 46 47 48 49 50 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.		
SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED	
BOS Clerk of the Board		



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Received On:

File #: 200462

Bid/RFP #:

#### **Notification of Contract Approval**

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1. FILING INFORMATION	3
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
	40
Original	<b>3</b> ,
AMENDMENT DESCRIPTION – Explain reason for amendment	
	<b>9</b> ,
	C,
	Ψ.

2. CITY ELECTIVE OFFICE OR BOARD		
OFFICE OR BOARD NAME OF CITY ELECTIVE OFFICER		
Board of Supervisors	Members	

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

4. CONTRACTING DEPARTMENT CONTACT			
NAME OF DEPA	RTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER	
Michael Ki	ing	415-701-4228	
FULL DEPARTM	ENT NAME	DEPARTMENT CONTACT EMAIL	
MYR	Mayor's Office of Housing and Comm Dev	michael.king@sfgov.org	

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
La Casa de las Madres	415-503-0500
STREET ADDRESS (including City, State and Zip Code)	EMAIL
1269 Howard Street, San Francisco, CA 94103	Kathy@lacasa.org

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6. CONTRACT				
DATE CONTRACT WAS APPROVED BY THE CITY	ELECTIVE OFFICER(S)	ORIGINAL BID/R	FP NUMBER	FILE NUMBER (If applicable) 200462
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DESCRIPTION OF AMOUNT OF CONTRACT	<b>*</b>			
\$165,000	,6,			
NATURE OF THE CONTRACT (Please describe)	140			
ESG grant for emergency shelter	essential serv	ices		
		S.O	DOKU	
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7. COMMENTS				
8. CONTRACT APPROVAL				
This contract was approved by:				
THE CITY ELECTIVE OFFICER(S) IDENTIFIED	ON THIS FORM			
A BOARD ON WHICH THE CITY ELECTIVE C	OFFICER(S) SERVES			
Board of Supervisors				
THE BOARD OF A STATE AGENCY ON WHI	CH AN APPOINTEE OF	THE CITY ELECTIVE	OFFICER(S) I	DENTIFIED ON THIS FORM SITS
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cont	contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ		
1	Вее	Maria	Board of Directors		
2	Omata	Christine	Board of Directors		
3	Zauss	Christine	Board of Directors		
4	Sanchez	Carmen	Board of Directors		
5	Miller Creary	Betty	Board of Directors		
6	на1е	Katie	Board of Directors		
7	Lee	Dora	Board of Directors		
8	Stellini	Arthur	Board of Directors		
9	Tsai	Carolyn	Board of Directors		
10	Tucker	Nanci	Board of Directors		
11	Jolivet	Melanie	Board of Directors		
12	Steele	Shawn	Board of Directors		
13	Esecson	Austin	Board of Directors		
14	Black	Kathy	CEO		
15	DeCastro	Cynthia	CF0		
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contract.			
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
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## 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 39 40 41 42 43 44 45 46 47 48 49 50 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.		
SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR	DATE SIGNED	
CLERK		
BOS Clerk of the Board		



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Bid/RFP #:

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1. FILING INFORMATION	3
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
	40
Original	<b>3</b> ,
AMENDMENT DESCRIPTION – Explain reason for amendment	
	<b>9</b> ,
	C,
	Ψ.

2. CITY ELECTIVE OFFICE OR BOARD	
OFFICE OR BOARD NAME OF CITY ELECTIVE OFFICER	
Board of Supervisors	Members

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

4. CONTRACTING DEPARTMENT CONTACT		
NAME OF DEPARTMENTAL CONTACT		DEPARTMENT CONTACT TELEPHONE NUMBER
Michael King		415-701-4228
FULL DEPARTMENT NAME		DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Housing and Comm Dev	michael.king@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
Larkin Street Youth Services	415-673-0911
STREET ADDRESS (including City, State and Zip Code)	EMAIL
134 Golden Gate Avenue, San Francisco, CA 94102	sadams@larkinstreetyouth.org

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6. CO	NTRACT			
	CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (If applicable)
				200462
	400			
DESCI	RIPTION OF AMOUNT OF CONTRACT	1		
<b>\$</b> 11	12,000			
411	12,000			
NATU	RE OF THE CONTRACT (Please describe)			
ESC	G grant for emergency shelter essential serv	vices		
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l .	contract was approved by:			
	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM			
	A DOADD ON WINCH THE CITY ELECTIVE OFFICED(C) CEDVEC			
	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES			
	Board of Supervisors			
	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF	THE CITY ELECTIV	/E OFFICER(S) I	DENTIFIED ON THIS FORM SITS

contract.			
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
1	Kramer	Terry	Board of Directors
2	Fatum	Art	Board of Directors
3	Hatvany	Nina	Board of Directors
4	Alexander	Suzi	Board of Directors
5	Avenier	Jeremy	Board of Directors
6	Wysocki	Allison	Board of Directors
7	Berg	Siri	Board of Directors
8	Brahm	Jennifer	Board of Directors
9	Cameron	Cecily	Board of Directors
10	Cody	Daniel	Board of Directors
11	Famulener	Conor	Board of Directors
12	Grossman	Blake	Board of Directors
13	Henry	Jim	Board of Directors
14	Hicks	John	Board of Directors
15	Hoecker	Anne	Board of Directors
16	Johnson	Eric	Board of Directors
17	Kerzic	Rick	Board of Directors
18	Moise	Adam	Board of Directors
19	Newton Jr.	Willis	Board of Directors

contract.			
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
20	Roos	Eric	Board of Directors
21	Schlein	Phil	Board of Directors
22	Schwartz	Aaron	Board of Directors
23	Shapiro	sally	Board of Directors
24	Viola	John	Board of Directors
25	Wibbelsman	Chuck	Board of Directors
26	Powe11	Laura	Board of Directors
27	Garelick	Jeff	Board of Directors
28	Adams	Sherilyn	CEO
29	Hunter	Carol	CF0
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## 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

## 39 40 41 42 43 44 45 46 47 48 49 50 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. SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR DATE SIGNED

CLERK	
BOS Clerk of the Board	



25 Van Ness Avenue, Suite 220, San Francisco, CA 94102 Phone: 415.252.3100 . Fax: 415.252.3112 ethics.commission@sfgov.org . www.sfethics.org

Received On:

File #: 200462

1

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: <a href="https://sfethics.org/compliance/city-officers/contract-approval-city-officers">https://sfethics.org/compliance/city-officers</a>

1. FILING INFORMATION	3
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
	40
Original	0,,
AMENDMENT DESCRIPTION – Explain reason for amendment	10
	<b>1</b>
	X

2. CITY ELECTIVE OFFICE OR BOARD		
OFFICE OR BOARD NAME OF CITY ELECTIVE OFFICER		
Board of Supervisors	Members	

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

4. CONTRACTING DEPARTMENT CONTACT		
NAME OF DEPARTMENTAL CONTACT		DEPARTMENT CONTACT TELEPHONE NUMBER
Michael King		415-701-4228
FULL DEPARTM	ENT NAME	DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Housing and Comm Dev	michael.king@sfgov.org

5. CONTRACTOR			
NAME OF CONTRACTOR	TELEPHONE NUMBER		
Mission Area Health Associates	415-552-3870		
STREET ADDRESS (including City, State and Zip Code)	EMAIL		
240 Shotwell Street, San Francisco, CA 94110	brendastorey@mnhc.org		

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		•		
6. CONTRACT				
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE (	OFFICER(S)	ORIGINAL BID/I	RFP NUMBER	FILE NUMBER (If applicable) 200462
DESCRIPTION OF AMOUNT OF CONTRACT	<b>9</b>			
\$55,943	.6%			
NATURE OF THE CONTRACT (Please describe)				
ESG grant for homelessness prevention	services	9		
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7. COMMENTS				
8. CONTRACT APPROVAL				
This contract was approved by:	FODM.			
THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS	FUKIVI			
A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S)	) SERVES			
Board of Supervisors	,			
Board of Supervisors				
THE BOARD OF A STATE AGENCY ON WHICH AN AP	POINTEE OF	THE CITY ELECTIV	E OFFICER(S) II	DENTIFIED ON THIS FORM SITS

cont	contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ		
1	Martinez	Amelia	Board of Directors		
2	Franklin	Rita	Board of Directors		
3	Wohler	Ricardo	Board of Directors		
4	Garcia	Francisco	Board of Directors		
5	Molinero	Maria	Board of Directors		
6	Mora	Sandra	Board of Directors		
7	Decker	Richard	Board of Directors		
8	Bach-y-Rita	George	Board of Directors		
9	Moser	Charles	Board of Directors		
10	Ponce	Mary Lou	Board of Directors		
11	Storey	Brenda	CEO		
12	Salako	Sade	CF0		
13	Caplan	Patricia	C00		
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cont	contract.			
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ	
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## 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 39 40 41 42 43 44 45 46 47 48 49 50 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.		
SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED	
BOS Clerk of the Board		



25 Van Ness Avenue, Suite 220, San Francisco, CA 94102 Phone: 415.252.3100 . Fax: 415.252.3112 ethics.commission@sfgov.org . www.sfethics.org

Received On:

File #: 200462

1

Bid/RFP #:

#### **Notification of Contract Approval**

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1. FILING INFORMATION	3
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
	40
Original	0,,
AMENDMENT DESCRIPTION – Explain reason for amendment	10
	<b>1</b>
	X

2. CITY ELECTIVE OFFICE OR BOARD		
OFFICE OR BOARD NAME OF CITY ELECTIVE OFFICER		
Board of Supervisors	Members	

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

4. CONTRACTING DEPARTMENT CONTACT		
NAME OF DEPARTMENTAL CONTACT		DEPARTMENT CONTACT TELEPHONE NUMBER
Michael King		415-701-4228
FULL DEPARTM	ENT NAME	DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Housing and Comm Dev	michael.king@sfgov.org

5. CONTRACTOR			
NAME OF CONTRACTOR		TELEPHONE NUMBER	
Providence Foundation of San Francisco		415-206-0263	
STREET ADDRESS (including City, State and Zip Code)		EMAIL	
4601 Third Street, San Francisco, CA 94124			
6. CONTRACT			
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (If applicable) 200462
			200402
DESCRIPTION OF AMOUNT OF CONTRACT			
\$50,000			
NATURE OF THE CONTRACT (Please describe)			
ESG grant for emergency shelter essential serv	rices		
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Esd grant for emergency shereer essential services			
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7. COMMENTS			
8. CONTRACT APPROVAL			
This contract was approved by:			
THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM			
A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES			
□ Board of Supervisors			
THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF	THE CITY ELECTIV	/E OFFICER(S) II	DENTIFIED ON THIS FORM SITS

con	contract.			
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ	
1	Blanding	James	Board of Directors	
2	Anthony	Bernadetta	Board of Directors	
3	Buie	Alpha	Board of Directors	
4	Moten	Cynthia	Board of Directors	
5	Williams	Lanita	Board of Directors	
6	Doyle	Patricia	CEO	
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
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9. AFFILIATES AND SUBCONTRACTORS					
exec who	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	ТҮРЕ		
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49					
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	Check this box if you need to include ad Select "Supplemental" for filing type.	ditional names. Please submit a separate	e form with complete information.		
	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.					

## SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR DATE SIGNED **CLERK** BOS Clerk of the Board



25 Van Ness Avenue, Suite 220, San Francisco, CA 94102 Phone: 415.252.3100 . Fax: 415.252.3112 ethics.commission@sfgov.org . www.sfethics.org

Received On:

File #: 200462

Bid/RFP #:

#### **Notification of Contract Approval**

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1. FILING INFORMATION	3
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
	40
Original	0,,
AMENDMENT DESCRIPTION – Explain reason for amendment	10
	<b>1</b>
	X

2. CITY ELECTIVE OFFICE OR BOARD		
OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER	
Board of Supervisors	Members	

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

4. CONTRACTING DEPARTMENT CONTACT			
NAME OF DEPARTMENTAL CONTACT		DEPARTMENT CONTACT TELEPHONE NUMBER	
Michael King		415-701-4228	
FULL DEPARTMENT NAME		DEPARTMENT CONTACT EMAIL	
MYR	Mayor's Office of Housing and Comm Dev	michael.king@sfgov.org	

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
St. Vincent de Paul Society of San Francisco	415-977-1270
STREET ADDRESS (including City, State and Zip Code)	EMAIL
1175 Howard Street, San Francisco, CA 94103	swooldridge@svdp-sf.org

6. CC	DNTRACT		
	CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
	<b>A</b>		200462
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\$5	0,000		
NATU	JRE OF THE CONTRACT (Please describe)		
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7. CC	DMMENTS		
8 CC	ONTRACT APPROVAL		
	contract was approved by:		
11113	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM		
	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS TORIN		
	A DOADD ON WHICH THE CITY ELECTIVE OFFICER(C) CERVES		
	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES		
	Board of Supervisors		
	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF	THE CITY ELECTIVE OFFICER(S) I	DENTIFIED ON THIS FORM SITS

#	LAST NAME/ENTITY/SUBCONTRACTOR		
	LAST NAIVIE/ENTITY/SOBCONTRACTOR	FIRST NAME	ТҮРЕ
1	Arbouex	Martha	Board of Directors
2	Cooney	Joseph	Board of Directors
3	Montgomery	Tom	Board of Directors
4	Brosnahan	Brian	Board of Directors
5	Allen-Lovenbrook	Helen	Board of Directors
6	Bryan	Greg	Board of Directors
7	Vega	Belinda	Board of Directors
8	Gatewood	Jackie	Board of Directors
9	Wooldridge	Shari	CEO
10	Eliot	Justin	CF0
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
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### 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 39 40 41 42 43 44 45 46 47 48 49 50 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 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. SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK BOS Clerk of the Board