

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 . www.sfethics.org

Received On:

File #: 200935

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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

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1. FILING INFORMATION	
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
	40
Original	0',
AMENDMENT DESCRIPTION – Explain reason for amendment	
	10
	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	
David Kashani		415-355-3607	
FULL DEPARTMENT NAME		DEPARTMENT CONTACT EMAIL	
HSA	Human Services Agency	David.Kashani@sfgov.org	

5. CONTRACTOR				
NAME OF CONTRACTOR	TELEPHONE NUMBER			
Allied Universal Services	415.926.6405			
STREET ADDRESS (including City, State and Zip Code)	EMAIL			
545 Samsone Ste 600, San Francisco, CA 94111	Christian.Arno@aus.com			

6. CC	ONTRACT				
DATE	CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (If applicable) 200935	
DECC	DIDTION OF AMOUNT OF CONTRACT				
	7,222,088				
NATI	JRE OF THE CONTRACT (Please describe)				
Th Co pr en	The Human Services Agency was tasked with providing Unarmed Security Services at City and County of San Francisco managed COVID sites throughout the City. The proposed agreement will provide unarmed security guards to act as a first deterrent for inappropriate activity, ensure the safety of hotel staff and guests, protect CCSF managed properties, and guard against vandalism.				
7 CC	7. COMMENTS				
	ONTRACT APPROVAL				
inis	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	

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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.

1	Jones	FIRST NAME	ТҮРЕ
1	Jones		
		Steven	CE0
2	Vollero	Drew	CF0
3	Buckman	David I.	Other Principal Officer
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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.

#	ract. LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТУРЕ
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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.

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 BOS Clerk of the Board