

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: 04-28-2021 | 16:55:23 PDT

File #: 210309

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

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

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 DEP	PARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Michael King		415-701-4228
FULL DEPART	MENT NAME	DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Comm. Dev.	michael.king@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
Bay Area Legal Aid	510-250-5243	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
1735 Telegraph Avenue, Oakland, CA 94612	grichardson@baylegal.org	

6. CC	ONTRACT			
DATE	CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	
04	/27/2021			210309
DESC	RIPTION OF AMOUNT OF CONTRACT			
\$1	75,000			
NATI	JRE OF THE CONTRACT (Please describe)			
	VID-19 rental debt small claims/collections dividual consultations, and legal representa		ces, inclu	ding group workshops,
7.00				
/. CO	DMMENTS			
8. CO	ONTRACT APPROVAL			
	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) I	DENTIFIED ON THIS FORM SITS

2

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
1	Goodin	Robert	Board of Directors
2	Alderman	william	Board of Directors
3	Brackett	Bivett	Board of Directors
4	Brayton	Alan	Board of Directors
5	Castrillo	Sheila	Board of Directors
6	Cunningham	Teresa	Board of Directors
7	Dean	Gladys	Board of Directors
8	Duckworth	John	Board of Directors
9	Dwyer	John	Board of Directors
10	Edmonds	Greg	Board of Directors
11	Feller	Fred	Board of Directors
12	Foran	Derek	Board of Directors
13	Frazier	Ennoaja	Board of Directors
14	Gagen, Jr.	william	Board of Directors
15	Goff	Hazel	Board of Directors
16	нірр	Arlene	Board of Directors
17	Hockett	Christopher	Board of Directors
18	Hughes	Jonathan	Board of Directors
19	Moriarty Lane	Molly	Board of Directors

3

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
20	Lee	Theodora	Board of Directors
21	McClain	David	Board of Directors
22	Murphy	David	Board of Directors
23	Nassif	Wassim	Board of Directors
24	Planthold	Robert	Board of Directors
25	Samoylova	Natalya	Board of Directors
26	Schwegman	Susan	Board of Directors
27	Silverman	Karen	Board of Directors
28	Simons	Rick	Board of Directors
29	Speir	George	Board of Directors
30	Steuer	David	Board of Directors
31	Tobacco, Jr.	Joseph	Board of Directors
32	Van Nest	Robert	Board of Directors
33	Richardson	Genevieve	CEO
34			
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36			
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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

Select Supplemental for him g 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 cor	nplete.	
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	
Docusigned by:  988C8F42C3084B5  Angela Calvillo	04-28-2021   16:55:23 PDT	



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: 04-28-2021 | 16:54:29 PDT

1

File #: 210309

Bid/RFP #:

# **Notification of Contract Approval**

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(S.F. Campaign and Governmental Conduct Code § 1.126(f)4)
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1. FILING INFORMATION		
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)	
Original		
AMENDMENT DESCRIPTION – Explain reason for amendment		

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 Comm. Dev.	michael.king@sfgov.org

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

6 C0	DNTRACT		
	CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		,	210309
04	/27/2021		
DESC	RIPTION OF AMOUNT OF CONTRACT		
¢2	00.000		
\$4	00,000		
NATU	JRE OF THE CONTRACT (Please describe)		
S	ogram implementation of the City's COVID-19 taff support and infrastructure necessary to easury Emergency Rental Assistance funds.		
7 C	DMMENTS		
7. 00	JANUEL 13		
8. CC	ONTRACT APPROVAL		
This	contract was approved by:		
	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM		
Ш			
	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES		
	Board of Supervisors		
$\vdash$	THE BOADD OF A STATE AGENCY ON WHICH AN ADDOINTER OF	THE CITY ELECTIVE OFFICER(S)	DENTIFIED ON THIS FORM SITS
$ \Box $	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF	THE CITY ELECTIVE OFFICER(S) I	DEINTIFIED OIN THIS FUKIVI 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	

#	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	Jilma	Meneses	CEO
33	Spindle	Keith	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, inclu
executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any indivi
who has an augustain interest of 10 nercent or more in the contractor, and (D) any subcontractor listed in the b

uding chief ridual 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		ТУРЕ
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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				
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.				
			DATE SIGNED	
CLE	DocuSigned by:		04-28-2021   1	6:54:29 PDT
	988C8E42C3084B5			

10. VERIFICATION	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 con	nplete.		
·			
I certify under penalty of perjury under the laws of the State o	f California that the foregoing is true and correct.		
SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR DATE SIGNED			
CLERKDocuSigned by:			
DocuSigned by:	04-28-2021   16:54:29 PDT		
Angela Calvillo			



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Bid/RFP #:

# **Notification of Contract Approval**

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

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 Comm. Dev.	michael.king@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
Causa Justa :: Just Cause	510-763-5877
STREET ADDRESS (including City, State and Zip Code)	EMAIL
1419 34th Ave., #203, Oakland, CA 94601	vanessa@cjjc.org

6. C	ONTRACT				
	CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (If applicable)	
		,		210309	
04	/27/2021				
DEC	PRINTION OF AMOUNT OF CONTRACT				
DESC	CRIPTION OF AMOUNT OF CONTRACT				
\$2	5,000				
NAT	JRE OF THE CONTRACT (Please describe)				
т.	nants' rights education, tenant counseling,	and navigate	ion		
16	maires rights education, tenant counsering,	and navigat	1011.		
7. C	OMMENTS				
9. 64	ONTRACT APPROVAL				
inis	contract was approved by:				
	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM				
Ш					
	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	

cont	contract.			
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ	
1	Lee	NTanya	Board of Directors	
2	Gold	Adam	Board of Directors	
3	Foy	Michelle	Board of Directors	
4	Guzman	Laura	Board of Directors	
5	Guillen	Maria	Board of Directors	
6	Moses	Vanessa	CEO	
7	Dominguez	Aspen	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 of	officers, ir
executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (	(C) any ind

ncluding chief dividual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or

COIII	iact.		
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
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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 con	nplete.	
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	
DocuSigned by:  988C8F42C3084B5  Angela Calvillo	04-28-2021   16:53:32 PDT	



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Received On: 04-28-2021 | 16:52:39 PDT

File #: 210309

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

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

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 DEP	PARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Michael I	King	415-701-4228
FULL DEPART	MENT NAME	DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Comm. Dev.	michael.king@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
Chinatown Community Development Center, Inc.	415-984-1450
STREET ADDRESS (including City, State and Zip Code)	EMAIL
1525 Grant Avenue, San Francisco, CA 94133	myeung@chinatowncdc.org

6. C	ONTRACT					
	CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (If applicable) 210309		
04	/21/2021			210309		
DESC	CRIPTION OF AMOUNT OF CONTRACT					
\$2	5,000					
NAT	URE OF THE CONTRACT (Please describe)					
Те	nants' rights education, tenant counseling,	and navigat	ion.			
7 C	7. COMMENTS					
7. 00	JAINIER 13					
	ONTRACT 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 ELECTIN	/E OFFICER(S) II	DENTIFIED ON THIS FORM SITS		

cont	contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ		
1	Quock	Lindsey	Board of Directors		
2	Craig	Cathy	Board of Directors		
3	Golvin	Benjamin	Board of Directors		
4	Jew	Clayton	Board of Directors		
5	Leadbetter	Julie	Board of Directors		
6	Lin	Barbara	Board of Directors		
7	McCray	James	Board of Directors		
8	Nguyen	James	Board of Directors		
9	Ruiz	Santiago	Board of Directors		
10	Tse	Janet Lee	Board of Directors		
11	Tse	Nigel	Board of Directors		
12	Wong	Susan	Board of Directors		
13	Zhang	Mary	Board of Directors		
14	Zoubi	Fady	Board of Directors		
15	Chin	Jane	Board of Directors		
16	Lin	wendell	Board of Directors		
17	Rosenquest	Nils	Board of Directors		
18	Cordero	Terence	Board of Directors		
19	Fagler	James	Board of Directors		

cont	contract.					
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ			
20	Poe	Irma	Board of Directors			
21	Lee	Olson	Board of Directors			
22	Yeung	Malcolm	CEO			
23	Gansen	Karen	CF0			
24	Jones	Whitney	C00			
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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						
Lha	ve used all reasonable diligence in preparing this statement	I have reviewed this st	atement and to the hest	of my			
			atement and to the best	Offilly			
	knowledge the information I have provided here is true and complete.						
kno	wiedge the information i have provided here is true and co						
kno	wiedge the information rhave provided here is true and co						
	rtify under penalty of perjury under the laws of the State of	•	regoing is true and corre	ct.			
l ce	· ·	•	regoing is true and corre	ct.			
l ce	rtify under penalty of perjury under the laws of the State of NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR	of California that the fo	regoing is true and corre	ct.			
l ce	rtify under penalty of perjury under the laws of the State of NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR	of California that the for		ct.			
l ce	rtify under penalty of perjury under the laws of the State of NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR	of California that the fo		ct.			
l ce	rtify under penalty of perjury under the laws of the State of NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR	of California that the for		ct.			
l ce	rtify under penalty of perjury under the laws of the State of NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR RK  DocuSigned by:  988C8F42C308485	of California that the for		ct.			
l ce	rtify under penalty of perjury under the laws of the State of NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR RK  Docusigned by:	of California that the for		ct.			
l ce	rtify under penalty of perjury under the laws of the State of NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR RK  DocuSigned by:  988C8F42C308485	of California that the for		ct.			
l ce	rtify under penalty of perjury under the laws of the State of NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR RK  DocuSigned by:  988C8F42C308485	of California that the for		ct.			



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Received On: 04-28-2021 | 16:51:46 PDT

File #: 210309

Bid/RFP #:

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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 DEPARTI	MENT NAME	DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Comm. Dev.	michael.king@sfgov.org

5. CONTRACTOR				
NAME OF CONTRACTOR	TELEPHONE NUMBER			
Consumer Credit Counseling Service of San Francisco	800-777-7526			
STREET ADDRESS (including City, State and Zip Code)	EMAIL			
50 California Street, Suite 1500, SF, CA 94111	rdelgadillo@balancepro.org			

6. CC	ONTRACT				
DATE	CONTRACT WAS APPROVED BY THE CITY ELECTIVE	VE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)	
04,	/27/2021			210309	
DESC	RIPTION OF AMOUNT OF CONTRACT				
\$2	50,000				
NATU	JRE OF THE CONTRACT (Please describe)				
HUI	D approved homeowner foreclosure	interventio	n counseling and loss	mitigation.	
	approved nomeowner roreerosure	cc. venero	in counsering and ross	mre i gue roni	
7. COMMENTS					
/. CC	DIVINIENTS				
	ONTRACT APPROVAL				
This	contract was approved by:				
	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON TH	HIS FORM			
Ш					
	A BOARD ON WHICH THE CITY ELECTIVE OFFICER	R(S) SERVES			
	Board of Supervisors				
	Source of Supervisors				
	THE BOARD OF A STATE AGENCY ON WHICH AN	APPOINTEE OF	THE CITY ELECTIVE OFFICER(S) II	DENTIFIED ON THIS FORM SITS	
Ш					

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
1	Layman	Thomas	Board of Directors
2	Houle	Brad	Board of Directors
3	Hoffman	James	Board of Directors
4	Barrett	Melyssa	Board of Directors
5	Birenbaum	Nancy	Board of Directors
6	Dunaway	JoAnn	Board of Directors
7	Covert	Michael	Board of Directors
8	Coffin	Tristram	Board of Directors
9	Albert	Darren	Board of Directors
10	Sanchez	Ruben	Board of Directors
11	Christoff	Darrell	Board of Directors
12	Delgadillo	Rico	CEO
13	Cota	Tina	CF0
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
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9. A	FFILIATES AND SUBCONTRACTORS		
List t exec who	the names of (A) members of the contractor cutive officer, chief financial officer, chief on thas an ownership interest of 10 percent of cract.	perating officer, or other persons with s	imilar titles; (C) any individual or entity
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
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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		
	ve used all reasonable diligence in prepari	ng this statement. I have reviewed this s	tatement and to the best of my

	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.			
SIGI	NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR	DATE SIGNED	
SIGI		DATE SIGNED  04-28-2021   16:51:46 PDT	



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: 04-28-2021 | 16:50:53 PDT

File #: 210309

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

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

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 k	King	415-701-4228
FULL DEPARTN	MENT NAME	DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Comm. Dev.	michael.king@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
Dolores Street Community Services, Inc.	718-915-0121	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
938 Valencia Street, San Francisco, CA 94110	laura@dscs.org	

6. CONTRACT				
	S APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (If applicable) 210309
04/27/2021				
DESCRIPTION OF AM	OUNT OF CONTRACT	<u>l</u>		
\$150,000				
NATURE OF THE CON	ITRACT (Please describe)			
Tenants' righ	ts education, tenant counseling,	and navigati	ion.	
7. COMMENTS	'			
8. CONTRACT APPE	ROVAL			
This contract was a				
THE CITY ELECT	TIVE OFFICER(S) IDENTIFIED ON THIS FORM			
	VHICH 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	Winn	Michael	Board of Directors	
2	Avila	Rocio	Board of Directors	
3	Hernandez	Pedro	Board of Directors	
4	Lin	Kani	Board of Directors	
5	Cameron	Anjali	Board of Directors	
6	Penfold	Ward	Board of Directors	
7	Bhakta	Chirag	Board of Directors	
8	Leonard-Wookey	Anat	Board of Directors	
9	Valdez	Laura	CEO	
10	нidalgo	Saul	C00	
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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 con	nplete.	
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 DocuSigned by:  04-28-2021   16:50:53 PDT  988C8F42C3084B5 Angela Calvillo		



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: 04-28-2021 | 16:49:56 PDT

File #: 210309

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

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

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 DEPART	MENT NAME	DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Comm. Dev.	michael.king@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
Eviction Defense Collaborative, Inc.	415-947-0797
STREET ADDRESS (including City, State and Zip Code)	EMAIL
1338 Mission Street, 4th Flr, San Francisco, CA 94103	martinac@evictiondefense.org

		L			
6. C	ONTRACT				
DATI	CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)		
04	/27/2021		210309		
DESC	RIPTION OF AMOUNT OF CONTRACT	<u> </u>			
\$6	35,000				
NAT	JRE OF THE CONTRACT (Please describe)				
pr d \$4	\$185,000 - Program implementation of the City's COVID-19 emergency rental assistance program, including staff support and infrastructure necessary to effectively and efficiently disburse U.S. Treasury Emergency Rental Assistance funds. \$450,000 - Legal representation and other legal assistance under the Tenant Right to Counsel program.				
7. C	7. COMMENTS				
	ONTRACT APPROVAL				
inis	contract was approved by:  THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM				
	THE CITY ELECTIVE OFFICER(3) 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) I	DENTIFIED ON THIS FORM SITS		

#	LACT NAME (CNITITY (CLUD CONTRACTOR		
	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
1	wolford	Jason	Board of Directors
2	Zadmehran	Sacha	Board of Directors
3	Gibson	Shirley	Board of Directors
4	Wright	Greg	Board of Directors
5	Alioto	Josephine	Board of Directors
6	Poland	Matt	Board of Directors
7	Cucullu Lim	Martina	CEO
8	Kislyuk	Yev	CF0
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#	LACT NAME (ENTITY (CLID CONTRACTOR		
	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 cei	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.		
SIGN	SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR DATE SIGNED		
CLEF	Docusigned by:	04-28-2021   16:49:56 PDT	
		•	



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: 04-28-2021 | 16:48:55 PDT

File #: 210309

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

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

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 DEPART	MENT NAME	DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Comm. Dev.	michael.king@sfgov.org

5. CONTRACTOR			
NAME OF CONTRACTOR	TELEPHONE NUMBER		
Filipino-American Development Foundation	415-348-8042		
STREET ADDRESS (including City, State and Zip Code)	EMAIL		
1010 Mission St, San Francisco, CA 94103	bernadette@bayanihancc.org		

6. C	ONTRACT			
DATI	E CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (If applicable) 210309
04	/27/2021			
DESC	CRIPTION OF AMOUNT OF CONTRACT			L
\$2	5,000			
NAT	URE OF THE CONTRACT (Please describe)			
Те	nants' rights education, tenant counseling,	and navigat	ion.	
7. C	DMMENTS			
0 0	ONTRACT APPROVAL			
	contract was approved by:			
5	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 ACENCY ON MURICULAN ADDOCUTES OF	THE CITY ELECTIV	/E OFFICER/S\ ::	DENITIFIED ON THIS FORM SITS
$ \Box $	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF	IHE CITY ELECTIV	/E OFFICER(S) II	DEMITHED ON THIS FORM 2112
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con	tract.		
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
1	Avenida	Ligaya	Board of Directors
2	Desuasido	Chito	Board of Directors
3	Chennault	Marivic	Board of Directors
4	Tancinco	Lourdes	Board of Directors
5	Bonilla	Erwin	Board of Directors
6	Gutierez	Don	Board of Directors
7	Panopio	Sandra	Board of Directors
8	Sy	Bernadette	CEO
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#	LACT NAME (ENITITY (CLID CONTRACTOR		
	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 entire

ecutive 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		ТУРЕ	
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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.					
SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR DATE SIGNED					
	CLERKDocuSigned by:				
988C8F42C3084R5					
	Angela Calvillo	ļ			



25 Van Ness Avenue, Suite 220, San Francisco, CA 94102 Phone: 415.252.3100 . Fax: 415.252.3112 <a href="mailto:ethics.commission@sfgov.org">ethics.commission@sfgov.org</a> . www.sfethics.org

Received On: 04-28-2021 | 16:47:55 PDT

1

File #: 210309

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

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

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 DEP	PARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER	
Michael H	King	415-701-4228	
FULL DEPARTI	MENT NAME	DEPARTMENT CONTACT EMAIL	
MYR	Mayor's Office of Comm. Dev.	michael.king@sfgov.org	

5. CONTRACTOR			
NAME OF CONTRACTOR	TELEPHONE NUMBER		
Homeownership San Francisco	415-202-5463		
STREET ADDRESS (including City, State and Zip Code)	EMAIL		
275 Fifth Street #314, San Francisco, CA 94103	Shannon@homeownershipsf.org		

6. CC	ONTRACT				
DATE	CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/R	FP NUMBER	FILE NUMBER (If applicable)	
04	/27/2021			210309	
DESC	RIPTION OF AMOUNT OF CONTRACT				
\$2	00,000				
NATI	JRE OF THE CONTRACT (Please describe)				
	meowner outreach, education against foreclos nd legal services.	ure rescue so	cams, and	navigation to counseling	
7. CC	DMMENTS				
1					
8. CC	ONTRACT 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) II	DENTIFIED ON THIS FORM SITS	

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cont	contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ		
1	Morales	Rafael	Board of Directors		
2	Castro	Juan Diego	Board of Directors		
3	Powers	Sheri	Board of Directors		
4	Davis	Kathryn	Board of Directors		
5	Farley	Clair	Board of Directors		
6	Cheng	Nobby	Board of Directors		
7	Bigge	Emma	Board of Directors		
8	Fitzsimmons	Katy	Board of Directors		
9	Rockmael	Keith	Board of Directors		
10	Way	Shannon	CE0		
11	Nerguizian	Alex	CF0		
12	Aslami	Elmar	C00		
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#	LACT NAME (ENITITY (CLID CONTRACTOR		
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9. AFFILIATES AND SUBCONTRACTOR
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cont	ontract.			
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ	
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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.		
SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR	DATE SIGNED	
DocuSigned by:  988C8F42C3084B5  Angela Calvillo	04-28-2021   16:47:55 PDT	



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Received On: 04-28-2021 | 16:47:03 PDT

File #: 210309

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

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

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 Comm. Dev.	michael.king@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
Homies Organizing the Mission to Empower Youth (HOMEY)	415-861-1600	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
2221 Mission Street, San Francisco, CA 94110	roberto@homey-sf.org	

6 00	ONTRACT		
	CONTRACT  CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
DAIL	CONTRACT WAS ATTROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL DID/RIT NOVIDER	210309
04	/21/2021		
DE0.0			
DESC	RIPTION OF AMOUNT OF CONTRACT		
\$2	45,000		
NATU	JRE OF THE CONTRACT (Please describe)		
S	ogram implementation of the City's COVID-19 taff support and infrastructure necessary to easury Emergency Rental Assistance funds.		
7. CO	DMMENTS		
8. CC	ONTRACT APPROVAL		
This	contract was approved by:		
	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM		
Ш			
	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 APPOINTEE OF	THE CITY ELECTIVE OFFICER(S) I	DENTIFIED ON THIS FORM SITS
$ \Box $		.,	

con	contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ		
1	Boroquez	Alfredo	Board of Directors		
2	Calderon	Alejandra	Board of Directors		
3	Rose	Pierre Marie	Board of Directors		
4	Donahue	Clement	Board of Directors		
5	Alfaro	Roberto	CE0		
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#	LACT NAME (ENITITY (CLID CONTRACTOR		
	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.

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		
L6:47:03 PDT		



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: 04-28-2021 | 16:46:11 PDT

File #: 210309

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

1. FILING INFORMATION		
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)	
	,,	
Original		
AMENDMENT DESCRIPTION – Explain reason for amendment		

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 DEPART	MENT NAME	DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Comm. Dev.	michael.king@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
Housing and Economic Rights Advocates	510-271-8443	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
1814 Franklin St., Ste 1040, Oakland, CA 94612	melisebrown@heraca.org	

6. C	ONTRACT		
DAT	E CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
	(27.42.2.4		210309
04	/27/2021		
DEC	CONTRACT		
DESC	CRIPTION OF AMOUNT OF CONTRACT		
\$2	50,000		
	,		
NAT	URE OF THE CONTRACT (Please describe)		
Но	meowner counseling and legal consultation.		
7.0			
/. C	OMMENTS		
8. C	ONTRACT APPROVAL		
	contract was approved by:		
	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM		
	THE CITY ELECTIVE OF THEE MAJOR PRODUCTION OF THIS TO MAY		
	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES		
X	Poard of Supervisors		
	Board of Supervisors		
	THE DOADD OF A STATE ASSAULT ON ANY ANY ADDOCUMENT OF	THE CITY ELECTIVE CERTOSE (C)	DENTIFIED ON THIS SOCIAL SIZE
	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF	THE CITY ELECTIVE OFFICER(S)	DENTIFIED ON THIS FORM SITS

	contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТУРЕ		
1	Berger	Justin	Board of Directors		
2	Chang	Scott	Board of Directors		
3	Espinosa	Todd	Board of Directors		
4	Garcia	Kristin	Board of Directors		
5	Nwanze	Solu	Board of Directors		
6	Price	Sandra	Board of Directors		
7	Jivani	Amyn	Board of Directors		
8	Zhang	James	Board of Directors		
9	Brown	Maeve	CEO		
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#	LACT NAME (ENITITY (CLID CONTRACTOR		
	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
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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			
l ha	ve used all reasonable diligence in preparing this statement	. I have reviewed this s	tatement and to the best o	f my
knowledge the information I have provided here is true and complete.				
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	rtify under penalty of perjury under the laws of the State of	of California that the fo	regoing is true and correct	
l ce		of California that the fo	regoing is true and correct	•
l ce	rtify under penalty of perjury under the laws of the State of NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR	T	regoing is true and correct	
I ce SIGI	rtify under penalty of perjury under the laws of the State of NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR	T		
I ce SIGI	rtify under penalty of perjury under the laws of the State of NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR	DATE SIGNED		
I ce SIGI	rtify under penalty of perjury under the laws of the State of NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR	DATE SIGNED		
I ce SIGI	NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR RK  Docusigned by:  988C8F42C308485	DATE SIGNED		



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: 04-28-2021 | 16:45:16 PDT

File #: 210309

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

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

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 Comm. Dev.	michael.king@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
La Raza Community Resource Center, Inc.	415-863-0764	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
474 Valencia Street, San Francisco, CA 94103	melbam@larazacrc.org	

6. CC	ONTRACT			
DATE	CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	
04	/27/2021			210309
	RIPTION OF AMOUNT OF CONTRACT			
\$2	45,000			
NATU	IRE OF THE CONTRACT (Please describe)			
S.	ogram implementation of the City's COVID-19 taff support and infrastructure necessary to easury Emergency Rental Assistance funds.	emergency ro effectively	ental assi y and effi	stance program, including ciently disburse U.S.
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7. 00	MINICHIS			
8.00	ONTRACT APPROVAL			
	contract was approved by:			
	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM			
	A DOADD ON WHICH THE CITY ELECTIVE OFFICED(S) SERVES			
	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

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cont	contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ		
1	Ramirez	Enrique	Board of Directors		
2	Contreras	Mariano	Board of Directors		
3	Silva	Bernardo	Board of Directors		
4	Martinez	Henry	Board of Directors		
5	Medina	Gabriel	Board of Directors		
6	Rodriguez	Jose	Board of Directors		
7	Sousa	Sarah	Board of Directors		
8	Carrillo	Lila	Board of Directors		
9	Seidman	Martin	Board of Directors		
10	Avila	Vishaka	Board of Directors		
11	Maldonado	меlba	CEO		
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
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## DocuSign Envelope ID: A8AE7246-4769-4DC9-856F-757CB75D2F04 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

 Check this box if you need to include additional names. Please Select "Supplemental" for filing type.	ease submit a separate	form with complete information.

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 con	nplete.	
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		
CLERKDocuSigned by:		
DocuSigned by:	04-28-2021   16:45:16 PDT	
000005400000405		
Angela Calvillo		



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Received On: 04-28-2021 | 16:44:20 PDT

1

File #: 210309

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

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

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 DEP	ARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Michael K	King	415-701-4228
FULL DEPARTN	MENT NAME	DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Comm. Dev.	michael.king@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
Mission Neighborhood Centers, Inc.	415-206-7752
STREET ADDRESS (including City, State and Zip Code)	EMAIL
362 Capp Street, San Francisco, CA 94110	santiago.ruiz@mncsf.org

6. CC	ONTRACT			
DATE	CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (If applicable) 210309
04,	/27/2021			210303
DESC	RIPTION OF AMOUNT OF CONTRACT			
\$24	45,000			
NATU	IRE OF THE CONTRACT (Please describe)			
S.	ogram implementation of the City's COVID-19 taff support and infrastructure necessary to easury Emergency Rental Assistance funds.			
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/. CC	OMMENTS			
۰ ۲۲	ONTRACT APPROVAL			
	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) I	DENTIFIED ON THIS FORM SITS

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
1	Hayon	Beverly	Board of Directors
2	Lei	zonia	Board of Directors
3	Renderos	Maria	Board of Directors
4	Barragan	Miguel	Board of Directors
5	Collins	Chris	Board of Directors
6	Rodriguez	Jose	Board of Directors
7	Carnero-Rossi	Liliana	Board of Directors
8	Sandlin	Gladys	Board of Directors
9	Lafaurie	Dianne	Board of Directors
10	Ehrenfeld	Kelly	Board of Directors
11	Arevalo	Nancy	Board of Directors
12	Schulz	Erich	Board of Directors
13	Iranpour	Afsaneh	Board of Directors
14	Guillen	Maria	Board of Directors
15	Ruiz	Santiago	CEO
16	Alioto	Sebastian	CF0
17	Rodriguez	Jose	C00
18			
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
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9. A	FFILIATES AND SUBCONTRACTORS		
	the names of (A) members of the contract		
	utive officer, chief financial officer, chief of has an ownership interest of 10 percent of		
cont	-	of more in the contractor, and (b) any su	beominacion listea in the bid of
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
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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.		
	VERIFICATION		
	ve used all reasonable diligence in prepari wledge the information I have provided he		tatement and to the best of my

	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 ha	ve used all reasonable diligence in preparing this statement	. I have reviewed this s	tatement and to the best of m	٧
knowledge the information I have provided here is true and complete.				,
KIII	knowledge the information mave provided here is true and complete.			
KIIO				
	rtify under penalty of perjury under the laws of the State o	of California that the fo	regoing is true and correct.	
l ce	rtify under penalty of perjury under the laws of the State on NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR	of California that the fo	regoing is true and correct.	
l ce	NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR		regoing is true and correct.	
l ce	NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR	DATE SIGNED		
l ce	NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR			
l ce	NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR  RK  Docusigned by:  988C8F42C3Q84B5	DATE SIGNED		
l ce	NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR RK  DocuSigned by:	DATE SIGNED		
l ce	NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR  RK  Docusigned by:  988C8F42C3Q84B5	DATE SIGNED		



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Received On: 04-28-2021 | 16:43:12 PDT

File #: 210309

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

1. FILING INFORMATION	
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
	,,
Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

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 DEP	PARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Michael H	King	415-701-4228
FULL DEPARTI	MENT NAME	DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Comm. Dev.	michael.king@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
Native American Health Center, Inc.	415-417-3503
STREET ADDRESS (including City, State and Zip Code)	EMAIL
160 Capp Street, San Francisco, CA 94110	chiragp@nativehealth.org

6. CC	ONTRACT					
DATE	CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (If applicable) 210309		
04	/27/2021			210303		
DESC	RIPTION OF AMOUNT OF CONTRACT					
\$2	45,000					
NATU	JRE OF THE CONTRACT (Please describe)					
S	ogram implementation of the City's COVID-19 taff support and infrastructure necessary to easury Emergency Rental Assistance funds.	emergency ro effectively	ental assi y and effi	stance program, including ciently disburse U.S.		
7. CC	7. COMMENTS					
	ONTRACT 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) I	DENTIFIED ON THIS FORM SITS		

cont	contract.						
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ				
1	Adams	Cindi	Board of Directors				
2	Davenport	Lee	Board of Directors				
3	Foghorn	Carmen	Board of Directors				
4	Rich	Jessica	Board of Directors				
5	Blacksmith	Nathan	Board of Directors				
6	Partida-Young	Victoria	Board of Directors				
7	Patel	Chirag	CE0				
8	Curley	Amber	CF0				
9	Garrett	Greg	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	ТҮРЕ		
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	Check this box if you need to include add Select "Supplemental" for filing type.	ditional names. Please submit a separate	e form with complete information.		

	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.					
I ce	rtify under penalty of perjury under the laws of the State o	of California that the fo	regoing is true and correct.		
	rtify under penalty of perjury under the laws of the State on NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR	of California that the fo	regoing is true and correct.		
	NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR	T			



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Received On: 04-28-2021 | 16:42:25 PDT

File #: 210309

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

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

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 DEP	PARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER	
Michael H	King	415-701-4228	
FULL DEPARTI	MENT NAME	DEPARTMENT CONTACT EMAIL	
MYR	Mayor's Office of Comm. Dev.	michael.king@sfgov.org	

5. CONTRACTOR				
NAME OF CONTRACTOR	TELEPHONE NUMBER			
San Francisco Apartment Association	415-255-2288			
STREET ADDRESS (including City, State and Zip Code)	EMAIL			
265 Ivy Street, San Francisco, CA 94102	Janan@sfaa.org			

6. CO	ONTRACT					
DATE	CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (If applicable)		
04	/27/2021			210309		
DESC	RIPTION OF AMOUNT OF CONTRACT			<u> </u>		
\$1	50,000					
NATI	JRE OF THE CONTRACT (Please describe)					
an	Outreach and engagement to landlords to promote participation in rental assistance programs and linkages to other eviction prevention and housing stabilization programs; technical assistance in tenant protections compliance.					
7. CO	7. COMMENTS					
8 ((	ONTRACT APPROVAL					
	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) I	DENTIFIED ON THIS FORM SITS		
			- (-)			

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
1	Bricker	Chris	Board of Directors
2	Link	Robert	Board of Directors
3	Henderson	Mark	Board of Directors
4	Hurley	Jim	Board of Directors
5	Wasserman	Dave	Board of Directors
6	Ferrigno	Andre	Board of Directors
7	Andresen	Eric	Board of Directors
8	Mar	Kent	Board of Directors
9	Mosser	Neveo	Board of Directors
10	Panzer	J.J.	Board of Directors
11	Polacci	Bert	Board of Directors
12	Gruber	David	Board of Directors
13	Bulkley	Honor	Board of Directors
14	New	Janan	CEO
15	Khaleel	Vanessa	C00
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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 "Sunnlemental" for filing type

Select Supplemental for filling 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 con	nplete.		
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		
Docusigned by:  988C8F42C3084B5  Angela Calvillo	04-28-2021   16:42:25 PDT		



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Received On: 04-28-2021 | 16:40:50 PDT

File #: 210309

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

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

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 I	King	415-701-4228
FULL DEPARTMENT NAME		DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Comm. Dev.	michael.king@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
San Francisco Food Bank	415-282-1900
STREET ADDRESS (including City, State and Zip Code)	EMAIL
900 Pennsylvania Avenue, San Francisco, CA 94107	info@sfmfoodbank.org

	DNTRACT	l .			
DATE	CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (If applicable) 210309	
04	/27/2021			210309	
DESC	RIPTION OF AMOUNT OF CONTRACT				
\$2	,243,061				
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NAT	JRE OF THE CONTRACT (Please describe)				
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0-~	ANITO A CT. A DOD OVAL				
	ONTRACT 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				
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	Board of Supervisors				
	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF	THE CITY ELECTIV	/E UEEICEB(S) II	DENTIFIED ON THIS FORM SITS	
$  \Box  $	THE BOARD OF A STATE AGENCY ON WHICH AN AFFORNIEE OF	CITT LLLCIIV	L OITICEN(3) II	DETAILED ON THIS FORMS SITS	

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
1	Brubaker	Scott	Board of Directors
2	Gencer	Cigdem	Board of Directors
3	Berg	Jessica	Board of Directors
4	Bonner	Noelle	Board of Directors
5	Cavagnaro	Dianna	Board of Directors
6	Chang	Jennifer	Board of Directors
7	Gonzalez	Pepe	Board of Directors
8	Gottfried	Randy	Board of Directors
9	Levy	Jennifer	Board of Directors
10	Nissenberg	Brett	Board of Directors
11	Park	Hyun	Board of Directors
12	Pearce	Stephen	Board of Directors
13	Rahmen	Nadia	Board of Directors
14	Rosston	Barbara	Board of Directors
15	Saenz	Joseph	Board of Directors
16	Schrage	Elliot	Board of Directors
17	Seligman	Hilary	Board of Directors
18	Seracka	Tara	Board of Directors
19	Shiue	Linda	Board of Directors

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
20	Sinha	Uma	Board of Directors
21	Terris	Michael	Board of Directors
22	Walker	Jonathan	Board of Directors
23	Crosby	Tanis	CEO
24	Braude	Michael	CF0
25	Brooks	Sean	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 $\neg$ | Check this box if you need to include additional names. Please submit a separate form with complete information.

ш	Select "Supplemental" for filing type.	
10.	VERIFICATION	
I ha	ve used all reasonable diligence in preparing this statement	I have reviewed this statement and to the best of my
kno	wledge the information I have provided here is true and cor	nplete.
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.		
SIGI	NATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR	DATE SIGNED
CLE	Pocusigned by:  988C8F42C3084B5  Angela Calvillo	04-28-2021   16:40:50 PDT



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: 04-28-2021 | 16:39:36 PDT

File #: 210309

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

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

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 Comm. Dev.	michael.king@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
San Francisco Housing Development Corporation	415-822-1022	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
4439 3rd Street, San Francisco, CA 94124	David@sfhdc.org	

	DNTRACT		
DAII	CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 210309
04	/27/2021		
DESC	RIPTION OF AMOUNT OF CONTRACT		
\$2	50,000		
NAT	JRE OF THE CONTRACT (Please describe)		
HU	D approved homeowner foreclosure intervention	n counseling and loss	mitigation.
7 C	DMMENTS		
7. C	SMINIER 13		
8. C0	ONTRACT 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) II	DENTIFIED ON THIS FORM SITS
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cont	contract.			
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ	
1	Kaslofsky	Thor	Board of Directors	
2	Golvin	Ben	Board of Directors	
3	Turner	Charles	Board of Directors	
4	Vincent	Dorris	Board of Directors	
5	Walker	Eddie	Board of Directors	
6	Beiro	Noreen	Board of Directors	
7	Wong	Daniel	Board of Directors	
8	Eskilden	Jennifer	Board of Directors	
9	Robinson	Lena	Board of Directors	
10	Sobel	David	CE0	
11	Kodzis	Peter	CF0	
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#	LACT NAME (ENTITY (CLID CONTRACTOR		
	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 con	nplete.
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 DocuSigned by:  988C8F42C3084B5  Angela Calvillo	04-28-2021   16:39:36 PDT



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: 04-28-2021 | 16:38:56 PDT

1

File #: 210309

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

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

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 DEPART	MENT NAME	DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Comm. Dev.	michael.king@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
San Francisco LGBT Community Center	415-865-5555	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
1800 Market Street, San Francisco CA 94102	RebeccaR@sfcenter.org	

6. CC	DNTRACT				
DATE	CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (If applicable) 210309	
04	/27/2021				
DESC	RIPTION OF AMOUNT OF CONTRACT	l			
\$2	50,000				
NATU	JRE OF THE CONTRACT (Please describe)				
HU	D approved homeowner foreclosure intervention	n counseling	g and loss	mitigation.	
7. CO	DMMENTS				
	NTRACT 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) I	DENTIFIED ON THIS FORM SITS	
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
1	Jesmonth	Sally	Board of Directors
2	Albright	Mika	Board of Directors
3	Brown	Jim	Board of Directors
4	Millard	Jonathan	Board of Directors
5	Paul	Chris	Board of Directors
6	Sun	Jeff	Board of Directors
7	King	Michelle	Board of Directors
8	De La O	Robert	Board of Directors
9	Natoli	Jane	Board of Directors
10	Rice	Pamela	Board of Directors
11	Gutierrez	Carlos	Board of Directors
12	Hernandez	Genesis	Board of Directors
13	Kulkarni	нrishi	Board of Directors
14	Perrson	Maceo	Board of Directors
15	Rolfe	Rebecca	CEO
16	Grant	Jennifer	CF0
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
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	Check this box if you need to include add Select "Supplemental" for filing type.	itional names. Please submit a separate	form with complete information.

·		
. I have reviewed this statement and to the best of my		
nplete.		
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		
Docusigned by:   04-28-2021   16:38:56 PDT		
r		



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File #: 210309

Bid/RFP #:

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

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1. FILING INFORMATION	
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
	,,
Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

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 DEPART	MENT NAME	DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Comm. Dev.	michael.king@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
San Francisco Study Center, Incorporated	415-626-1650	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
1663 Mission Street, Suite 310, SF, CA 94103	geoff@studycenter.org	

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
04/27/2021		210309
04/27/2021		
DESCRIPTION OF AMOUNT OF CONTRACT		
\$50,000		
NATURE OF THE CONTRACT (Planes describe)		
NATURE OF THE CONTRACT (Please describe)		
\$25,000 Tenants' rights education, tenant cou	nseling and navigation	(Bill Sorro Housing
Program).		
\$25,000 Tenants' rights education, tenant coul	iseling and navigation	(Housing Rights
Committee of San Francisco).		
7. COMMENTS		
8. CONTRACT APPROVAL		
This contract was approved by:		
THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM		
THE CITY ELECTIVE OFFICER(3) IDENTIFIED ON THIS FORM		
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 APPOINTEE OF	THE CITY ELECTIVE OFFICER(S) I	DENTIFIED ON THIS FORM SITS

cont	ract.		T
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
1	Burks	John	Board of Directors
2	Livingston	Richard	Board of Directors
3	Tong Yee	Tina	Board of Directors
4	Homma True	Reiko	Board of Directors
5	Margaronis	Stas	Board of Directors
6	McWilliams	James	Board of Directors
7	Elbgal	Hazim	Board of Directors
8	Eldon	Eric	Board of Directors
9	Kutnick	Benjamin	Board of Directors
10	Kwong	Jeanne	Board of Directors
11	Link	Geoffrey	CEO
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
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	Check this box if you need to include add Select "Supplemental" for filing type.	itional names. Please submit a separate	form with complete information.

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 con	nplete.	
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	
Docusigned by:  988C8F42C3084B5  Angela Calvillo	04-28-2021   16:38:08 PDT	



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File #: 210309

Bid/RFP #:

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

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1. FILING INFORMATION				
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Original				
AMENDMENT DESCRIPTION – Explain reason for amendment				

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 DEF	PARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER	
Michael	King	415-701-4228	
FULL DEPART	MENT NAME	DEPARTMENT CONTACT EMAIL	
MYR	Mayor's Office of Comm. Dev.	michael.king@sfgov.org	

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
Tenderloin Housing Clinic	415-885-3286
STREET ADDRESS (including City, State and Zip Code)	EMAIL
126 Hyde Street, San Francisco, CA 94102	randy@thclinic.org

6 00	ANITO 4 CT			
	ONTRACT CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	REP NUMBER	FILE NUMBER (If applicable)
				210309
04,	/27/2021			
DESC	RIPTION OF AMOUNT OF CONTRACT			L
\$2	5,000			
NATU	IRE OF THE CONTRACT (Please describe)			
Те	nants' rights education, tenant counseling,	and navigat	ion.	
	,	<b>.</b> . <b>.</b> .		
7. CC	OMMENTS			
	NTRACT 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			
	boar a Cr. Super Visors			
	THE DOADD OF A CTATE ACENCY ON WHICH AN ADDORUTE OF	THE CITY ELECTIV	/F OFFICER/C\ ''	DENTIFIED ON THIS FORM SITS
	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF	INE CITY ELECTIV	E OFFICEK(S) II	DEMILITIED ON THIS FORIN SHS

cont	tract.		
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
1	Tiedemann	Chris	Board of Directors
2	Dufty	Otto	Board of Directors
3	Brophy	Ken	Board of Directors
4	Wilson	Randy	Board of Directors
5	Medeiros	Jodie	Board of Directors
6	Seagraves	Gail	Board of Directors
7	Pujals	Fernando	Board of Directors
8	Shaw	Randy	CEO
9	Tang	Wynne	CF0
10	Allen	Tabitha	C00
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
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COIII	contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ		
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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	10 VERIFICATION				
	10. VERIFICATION				

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 con	nplete.	
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		
Docusigned by:  988C8F42C3084B5  Angela Calvillo	04-28-2021   16:37:05 PDT	



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File #: 210309

Bid/RFP #:

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

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1. FILING INFORMATION				
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)			
	,,			
Original				
AMENDMENT DESCRIPTION – Explain reason for amendment				

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 Comm. Dev.	michael.king@sfgov.org	

5. CONTRACTOR				
NAME OF CONTRACTOR	TELEPHONE NUMBER			
The Bar Association of San Francisco	415-982-1600			
STREET ADDRESS (including City, State and Zip Code)	EMAIL			
301 Battery St. 3rd Fl., San Francisco, CA 94111	yjackson@sfbar.org			

-						
6. C	ONTRACT					
	E CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (If applicable) 210309		
04	/27/2021			210303		
DESC	CRIPTION OF AMOUNT OF CONTRACT	<u> </u>				
\$3	00,000					
NAT	URE OF THE CONTRACT (Please describe)					
Co as	Court-based eviction prevention services, including settlement negotiation facilitation and assistance for self-represented litigants.					
7. C	7. COMMENTS					
8. C	ONTRACT 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 FI FCTIV	/E OFFICER(S) II	DENTIFIED ON THIS FORM SITS		
	The second of th		O			

1	Cheng	FIRST NAME	ТҮРЕ
1	Cheng		
	3	Doris	Board of Directors
2	Plunkett	Stuart	Board of Directors
3	Anderson	Marvin	Board of Directors
4	McNamara	Mary	Board of Directors
5	Jackson	Yolanda	CEO
6	Rodriguez	Sandra	CFO
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
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#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
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	Check this box if you need to include ad Select "Supplemental" for filing type.	ditional names. Please submit a separate	form with complete information.

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 Docusigned by:	04-28-2021   16:36:16 PDT	



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Bid/RFP #:

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1. FILING INFORMATION				
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)			
	,,			
Original				
AMENDMENT DESCRIPTION – Explain reason for amendment				

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 DEP	PARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Michael King		415-701-4228
FULL DEPARTMENT NAME		DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Comm. Dev.	michael.king@sfgov.org

5. CONTRACTOR			
NAME OF CONTRACTOR	TELEPHONE NUMBER		
Young Community Developers, Inc.	415-822-3491		
STREET ADDRESS (including City, State and Zip Code)	EMAIL		
1715 Yosemite Avenue, San Francisco, CA 94124	dbrookter@ycdjobs.org		

CONTRACT DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)  04/27/2021  DESCRIPTION OF AMOUNT OF CONTRACT \$835,000  NATURE OF THE CONTRACT (Please describe)  Program implementation of the City's COVID-19 emergency rental assistance program, including staff support and infrastructure necessary to effectively and efficiently disburse U.S.  Treasury Emergency Rental Assistance funds.  7. COMMENTS  8. CONTRACT APPROVAL This contract was approved by:  THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S) 04/27/2021  DESCRIPTION OF AMOUNT OF CONTRACT \$835,000  NATURE OF THE CONTRACT (Please describe) Program implementation of the City's COVID-19 emergency rental assistance program, including staff support and infrastructure necessary to effectively and efficiently disburse U.S. Treasury Emergency Rental Assistance funds.  7. COMMENTS  8. CONTRACT APPROVAL This contract was approved by:
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S) 04/27/2021  DESCRIPTION OF AMOUNT OF CONTRACT \$835,000  NATURE OF THE CONTRACT (Please describe) Program implementation of the City's COVID-19 emergency rental assistance program, including staff support and infrastructure necessary to effectively and efficiently disburse U.S. Treasury Emergency Rental Assistance funds.  7. COMMENTS  8. CONTRACT APPROVAL This contract was approved by:
DESCRIPTION OF AMOUNT OF CONTRACT \$835,000  NATURE OF THE CONTRACT (Please describe)  Program implementation of the City's COVID-19 emergency rental assistance program, including staff support and infrastructure necessary to effectively and efficiently disburse U.S. Treasury Emergency Rental Assistance funds.  7. COMMENTS  8. CONTRACT APPROVAL This contract was approved by:
DESCRIPTION OF AMOUNT OF CONTRACT \$835,000  NATURE OF THE CONTRACT (Please describe)  Program implementation of the City's COVID-19 emergency rental assistance program, including staff support and infrastructure necessary to effectively and efficiently disburse U.S.  Treasury Emergency Rental Assistance funds.  7. COMMENTS  8. CONTRACT APPROVAL This contract was approved by:
\$835,000  NATURE OF THE CONTRACT (Please describe)  Program implementation of the City's COVID-19 emergency rental assistance program, including staff support and infrastructure necessary to effectively and efficiently disburse U.S. Treasury Emergency Rental Assistance funds.  7. COMMENTS  8. CONTRACT APPROVAL This contract was approved by:
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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

contract.			
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
1	Spencer	Sedrick	Board of Directors
2	Moses	Toye	Board of Directors
3	Tatum	Carol	Board of Directors
4	Turner	Charles	Board of Directors
5	Everhart	Claude	Board of Directors
6	Jones	Shirley	Board of Directors
7	Anderson	Nadia	Board of Directors
8	Flores, Jr.	Manny	Board of Directors
9	Andrew	Rhonda	Board of Directors
10	Parikh	Mitesh	Board of Directors
11	Smith	Cheryl	Board of Directors
12	Potashner	Eric	Board of Directors
13	Brookter	Dion-Jay	CEO
14	Y00	Jenny	CF0
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	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
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9. AFFILIATES AND SUBCONTRACT	ORS
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	Check this box if you need to include add Select "Supplemental" for filing type.	itional names. Please submit a separate	form with complete information.	

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	
Docusigned by:  988C8F42C3084B5  Angela Calvillo	04-28-2021   16:35:24 PDT	