

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 #: 210640

Bid/RFP #: 95325

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Notification of Contract Approval

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

A Public Document

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

1. FILING INFORMATION	
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
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Original	3 ,
AMENDMENT DESCRIPTION – Explain reason for amendment	
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	6 .
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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	
Drake Herrador		415-554-6264	
FULL DEPARTI	MENT NAME	DEPARTMENT CONTACT EMAIL	
OCA	Office of Contract Administration	drake.herrador@sfgov.org	

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
San Francisco Bay Times	415-601-2113
STREET ADDRESS (including City, State and Zip Code)	EMAIL
358 Noe St., San Francisco, CA 94114	bettysnie@aol.com

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6. C	ONTRACT					
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)		ORIGINAL BID/I	RFP NUMBER	FILE NUMBER (If applicable)		
6/	22/2021	40	95325		210640	
DESC	RIPTION OF AMOUNT OF CONTRACT	1	•			
\$7	,777.77	,6%				
NAT	URE OF THE CONTRACT (Please describe)					
pr th	e purpose of this contract i inted in the City and circul e City.	s to provide out	outreach co	tising in ommunities	and neighborhoods for	
0.66	CALTE A CT. A DDD CV/AL					
	ONTRACT APPROVAL contract was approved by:					
	THE CITY ELECTIVE OFFICER(S) IDENTIFIE	ED ON THIS FORM				
	A BOARD ON WHICH THE CITY ELECTIVE	OFFICER(S) SERVES				
	Board of Supervisors					
	THE BOARD OF A STATE AGENCY ON WI	HICH AN APPOINTEE OF	THE CITY ELECTIV	'E OFFICER(S) I	DENTIFIED ON THIS FORM SITS	

9. AFFILIATES AND SUBCONTRACTORS

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

		contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ			
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9. AFFILIATES AND SUBCONTRACTORS

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

#	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.			
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.			
SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED		
BOS Clerk of the Board			