

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 #: 210771

Bid/RFP #:

1

Notification of Contract Approval

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

A Public Document

1. FILING INFORMATION	9_
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
Original	♥ .
AMENDMENT DESCRIPTION – Explain reason for amendment	0
	*

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

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

4. CONTRACTING DEPARTMENT CONTACT			
NAME OF DEPARTMENTAL CONTACT		DEPARTMENT CONTACT TELEPHONE NUMBER	
Dolly Sithounnolat		415-701-5565	
FULL DEPARTMENT NAME		DEPARTMENT CONTACT EMAIL	
MYR	Mayor's Office of Housing and Comm Dev	dolly.sithounnolat@sfgov.org	

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
Maitri Compassionate Care	415-558-3000
STREET ADDRESS (including City, State and Zip Code)	EMAIL
401 Duboce Avenue, San Francisco, CA 94117	rsmith@maitrisf.org

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6. CONTRACT	*			
	APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/R	FP NUMBER	
				210771
	400			
DESCRIPTION OF AMO	OUNT OF CONTRACT			
\$492,167	·Q',.			
NATURE OF THE CONT	RACT (Please describe)			
HOPWA Grants f	or residential care facility for	persons wit	h HTV/ATD	S
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7. COMMENTS				
8. CONTRACT APPRO	OVAL			
This contract was ap				
THE CITY ELECTI	VE OFFICER(S) IDENTIFIED ON THIS FORM			
4 00400 00144	HIGH THE CITY ELECTIVE OFFICED(C) CEDVEC			
	HICH THE CITY ELECTIVE OFFICER(S) SERVES			
□□□ Board of S	Supervisors			
THE BOARD OF	A STATE AGENCY ON WHICH AN APPOINTEE OF	THE CITY ELECTIVE	OFFICER(S) I	DENTIFIED ON THIS FORM SITS

con	contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТУРЕ		
1	King	James	Board of Directors		
2	Wong-Smith	Jane	Board of Directors		
3	Sallot	Jeffrey	Board of Directors		
4	Vigna	William	Board of Directors		
5	LaPointe	Ray	Board of Directors		
6	Neimeyer	Michael	Board of Directors		
7	Casado	Johannes	Board of Directors		
8	Smith	Rusty	CEO		
9	Richardson	Justin	CFO CFO		
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#	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 o	f California that the foregoing is true and correct.
SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



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Original	0,3,
AMENDMENT DESCRIPTION – Explain reason for amendment	
	1
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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	
Dolly Sithounnolat		415-701-5565	
FULL DEPARTMENT NAME		DEPARTMENT CONTACT EMAIL	
MYR	Mayor's Office of Housing and Comm Dev	dolly.sithounnolat@sfgov.org	

5. CONTRACTOR			
NAME OF CONTRACTOR	TELEPHONE NUMBER		
Mercy Housing California XVII,A CA Limited Partnership	415-355-7100		
STREET ADDRESS (including City, State and Zip Code)	EMAIL		
1256 Market Street, San Francisco, CA 94102	dshoemaker@mercyhousing.org		

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6. C	ONTRACT		
DAT	E CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
	₹ <mark>o</mark>		210771
DESC	CRIPTION OF AMOUNT OF CONTRACT	1	
\$5	0,000		
NAT	URE OF THE CONTRACT (Please describe)		
но	PWA grant for transitional housing facility	for persons with HIV/	AIDS
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		A Short	
7. C	OMMENTS		
	ONTRACT APPROVAL contract was approved by:		
11113	THE CITY ELECTIVE OFFICER(S) 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

2

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТУРЕ
1	Brigham	Tangerine	Board of Directors
2	Bertges	JoAnn	Board of Directors
3	Garcia	Christina	Board of Directors
4	Leshin	Mary Ann	Board of Directors
5	Mersey	Ezra	Board of Directors
6	Murray	Timothy	Board of Directors
7	Pavao	William	Board of Directors
8	Reigel	Craig	Board of Directors
9	Ruggiero	Janet	Board of Directors
10	Saez	Mirian	Board of Directors
11	Sewill	Ann	Board of Directors
12	Swift	Brian	Board of Directors
13	Wade	Steven	Board of Directors
14	Waskowiak	Mary	Board of Directors
15	Doug	Shoemaker	CEO
16	Mamet	Michele	C00
17	Spears	Steven	CF0
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#	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 **DATE SIGNED**

SAN FRANCISCO ETHICS COMMISSION – SFEC Form 126(f)4 v.12.7.18

BOS Clerk of the Board

CLERK



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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	
Dolly Sithounnolt		415-701-5565	
FULL DEPARTMENT NAME		DEPARTMENT CONTACT EMAIL	
MYR	Mayor's Office of Housing and Comm Dev	dolly.sithounnolat@sfgov.org	

5. CONTRACTOR			
NAME OF CONTRACTOR	TELEPHONE NUMBER		
Rafiki Coalition for Health and Wellness	415-615-9945		
STREET ADDRESS (including City, State and Zip Code)	EMAIL		
601 Cesar Chavez Street, San Francisco, CA 94124	mlesarre@rafikicoalition.org		

6. CC	ONTRACT			
	CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RF	P NUMBER	FILE NUMBER (If applicable)
				210771
DESC	RIPTION OF AMOUNT OF CONTRACT	•		
\$1	50,000			
NAT	JRE OF THE CONTRACT (Please describe)			
НО	PWA Grant for transitional housing facility			
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7. CO	DMMENTS			
	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 ARROUNTER OF	THE CITY ELECTIVE	OEEICED(S) II	DENTIFIED ON THIS FORM SITS
	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF	INC CITY ELECTIVE	OFFICEK(S) II	DEMITTED ON THIS PURIN SITS

con	contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ		
1	Elawar	May	Board of Directors		
2	Williams	Lisa	Board of Directors		
3	Frankel	Kevin	Board of Directors		
4	Oertel	Diana	Board of Directors		
5	Prince	Cynthia	Board of Directors		
6	Strong	Shirley	Board of Directors		
7	Moats	Phyllis	Board of Directors		
8	Washington	Robert	Board of Directors		
9	LeSarre	Monique	CEO		
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#	ract. LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТУРЕ
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10. VERIFICATION		
I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.		
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.		
SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED	
BOS Clerk of the Board		



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Original	3 ,
AMENDMENT DESCRIPTION – Explain reason for amendment	
	9 ,
	C,
	' O.

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
Dolly Sithounnolat		(415)701-5565
FULL DEPARTN	MENT NAME	DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Housing and Comm Dev	dolly.sithounnolat@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
Catholic Charities CYO of the Archdiocese of SF	(415) 972-1211
STREET ADDRESS (including City, State and Zip Code)	EMAIL
1555 39th Ave San Francisco, CA 94122	moreinfo@CatholicCharitiesSF.org

6. C	ONTRACT			
DATI	CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/F	RFP NUMBER	FILE NUMBER (If applicable) 210771
DESC	RIPTION OF AMOUNT OF CONTRACT			
\$1	,635,519			
NAT	JRE OF THE CONTRACT (Please describe)			
\$212,943 ESG Grant for homelessness prevention services. \$313,541 HOPWA Grant for Housing stability services for long-term rental subsidy households. \$346,921 HOPWA Grant for Residential care facility for persons with HIV/AIDS. \$762,114 HOPWA Grant for Residential care facility for persons with HIV/AIDS.				
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7. C	DMMENTS			
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 ELECTIV	E OFFICER(S) I	DENTIFIED ON THIS FORM SITS

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

contract.			
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТУРЕ
20	Molinelli	Stephen	Board of Directors
21	Regan	D. Paul	Board of Directors
22	Sundby	George	Board of Directors
23	Theofore	Pierre	Board of Directors
24	Westray	Kenneth	Board of Directors
25	Whitney	Lori	Board of Directors
26	wilch	Peter	Board of Directors
27	Cordileone	Salvatore	Board of Directors
28	Miller	Ann Gray	Board of Directors
29	Foedisch	Herbert	Board of Directors
30	Pautler	Michael	Board of Directors
31	Boerio	Joe	Board of Directors
32	Meneses	Jilma	CEO
33	Lopez	Charles	C00
34	Ewers	Cheryl	CF0
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9. AFFILIATES AND SUBCONTRACTORS List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract. LAST NAME/ENTITY/SUBCONTRACTOR **FIRST NAME** TYPE 39 40 41 42 43 44 45 46 47 48 49 50 Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.

10. VERIFICATION		
I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.		
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.		
SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED	
BOS Clerk of the Board		



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1. FILING INFORMATION	
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
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Original	0,,
AMENDMENT DESCRIPTION – Explain reason for amendment	***
	7 8
	X.

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

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

4. CONTRACTING DEPARTMENT CONTACT		
NAME OF DEP	ARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Dolly Sithounnlat		(415) 701-5565
FULL DEPARTN	MENT NAME	DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Housing and Comm Dev	dolly.sithounnolat@sfgov.org

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

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6. CONTRACT			
DATE CONTRACT WAS APPROVED BY THE CITY	ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBE	R FILE NUMBER (If applicable) 210771
DESCRIPTION OF AMOUNT OF CONTRACT	- O_		
\$454,481	567		
NATURE OF THE CONTRACT (Please describe)			
\$55,000 ESG Grant for case mana \$399,481 HOPWA grant for reside	agement for shel ential care faci	ter residents lity for persons wit	
7. COMMENTS			
8. CONTRACT APPROVAL			
This contract was approved by:			
THE CITY ELECTIVE OFFICER(S) IDENTIFIED	O ON THIS FORM		
A BOARD ON WHICH THE CITY ELECTIVE O	OFFICER(S) SERVES		
Board of Supervisors			
THE BOARD OF A STATE AGENCY ON WHI	ICH AN APPOINTEE OF	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

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con	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	
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cont	contract.		
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
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SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR **DATE SIGNED CLERK** BOS Clerk of the Board



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

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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
Dolly Sithounnolat		(415) 701-5565
FULL DEPARTM	MENT NAME	DEPARTMENT CONTACT EMAIL
MYR	Mayor's Office of Housing and Comm Dev	dolly.sithounnolat@sfgov.org

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

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6. CC	ONTRACT				
	CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 210771		
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DESC	RIPTION OF AMOUNT OF CONTRACT	ı			
\$30	09,044				
NATU	IRE OF THE CONTRACT (Please describe)				
\$112,000 ESG grant for emergency shelter services and case management \$197,044 HOPWA grant for residential care facility for persons with HIV/AIDS					
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7 ((DMMENTS				
7. CC	NAME OF THE PROPERTY OF THE PR				
	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				
	board of Supervisors				
$ \Box $	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF	THE CITY ELECTIVE OFFICER(S) II	DENTIFIED ON THIS FORM SITS		

2

contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ	
1	Alexander	Susan	Board of Directors	
2	Wysocki	Allison	Board of Directors	
3	Moise	Adam	Board of Directors	
4	Newton, Jr	Willis	Board of Directors	
5	Cody	Daniel	Board of Directors	
6	Grossman	вlake	Board of Directors	
7	Shapiro	Sally	Board of Directors	
8	Adms	Sherilyn	Board of Directors	
9	Avenier	Jeremy	Board of Directors	
10	Barnett	Fiona	Board of Directors	
11	Berg	Siri	Board of Directors	
12	Brahm	Jennifer	Board of Directors	
13	Cameron	Cecily	Board of Directors	
14	Davis	Matthew	Board of Directors	
15	Elias	Marice	Board of Directors	
16	Famulener	Conor	Board of Directors	
17	F00	Catherine	Board of Directors	
18	Garlick	Jeff	Board of Directors	
19	Hicks	John	Board of Directors	

contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ	
20	Hoecker	Anne	Board of Directors	
21	Horn	Tim	Board of Directors	
22	Johnson	Enic	Board of Directors	
23	Kerzic	Richard	Board of Directors	
24	Kiss	Patrick	Board of Directors	
25	Hatvany	Nina	Board of Directors	
26	Roos	Eric	Board of Directors	
27	Schwartz	Aaron	Board of Directors	
28	Valentine	D.	Board of Directors	
29	Viola	John	Board of Directors	
30	Adams	Sherilyn	CEO	
31	Hunter	Carol	C00	
32				
33				
34				
35				
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37				
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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				