

ORIGINAL

**FORM SFEC-126:**  
**NOTIFICATION OF CONTRACT APPROVAL**  
(S.F. Campaign and Governmental Conduct Code § 1.126)

2008 JUN -9 PM 3:38

<b>City Elective Officer Information</b> (Please print clearly.)	
Name of City elective officer(s):  Members, SF Board of Supervisors	City elective office(s) held:  Members, SF Board of Supervisors

<b>Contractor Information</b> (Please print clearly.)	
Name of contractor: Mary Elizabeth Inn	
Please list the names of (1) members of the contractor's board of directors; (2) the contractor's chief executive officer, chief financial officer and chief operating officer; (3) any person who has an ownership of 20 percent or more in the contractor; (4) any subcontractor listed in the bid or contract; and (5) any political committee sponsored or controlled by the contractor. Use additional pages as necessary.	
1) Board Members David Krimm, Chair Guido Gores, MD, Vice Chair Andy Chen, Internal Committee Chair Joanna Duthler, External Committee Chair Troy Brunet, Client Representative Billie Cooper, Client Representative Kate Greer Richard Miller Luann Simmons, JD  2) Executive Director Colm Hegarty Chief Financial Officer Kathi Varas, CPA  3) Not Applicable  4) CSV Hospitality, Inc.  5) Not Applicable	
Contractor address: 1040 Bush Street, San Francisco, CA 94109	
Date that contract was approved: 5/22/2008	Amount of contract: \$252,864
Describe the nature of the contract that was approved: Master Lease and Permanent Supportive Housing for Mary Elizabeth Inn	
Comments: Contract renewals are subject to the SF Board of Supervisors approval of the Care Fund.	

This contract was approved by (check applicable):

 the City elective officer(s) identified on this form a board on which the City elective officer(s) serves San Francisco Board of Supervisors

Print Name of Board

 the board of a state agency (Health Authority, Housing Authority Commission, Industrial Development Authority Board, Parking Authority, Redevelopment Agency Commission, Relocation Appeals Board, Treasure Island Development Authority) on which an appointee of the City elective officer(s) identified on this form sits

Print Name of Board

**Filer Information** *(Please print clearly.)*

Name of filer:

Clerk of SF Board of Supervisors

Contact telephone number:

( 415 ) 554-5184

Address: City Hall, Rm 244

1 Dr. Carlton B. Goodlett Pl., SF, CA 94102

E-mail:

Signature of City Elective Officer (if submitted by City elective officer)

Date Signed

Signature of Board Secretary or Clerk (if submitted by Board Secretary or Clerk)

Date Signed

2/9/09

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