

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

2009 JUL -9 7:11 3:07

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

Contractor Information (Please print clearly.)
Name of contractor: Tenderloin Housing Clinic
<i>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.</i>
<p>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</p> <p>2) Executive Director Colm Hegarty Chief Financial Officer Kathi Varas, CPA</p> <p>3) Not Applicable</p> <p>4) CSV Hospitality, Inc.</p> <p>5) Not Applicable</p>
Contractor address: 126 Hyde Street, San Francisco, CA 94102
Date that contract was approved: 6/19/2006
Amount of contract: \$41,985,388
Describe the nature of the contract that was approved: Master Lease and Permanent Supportive Housing for 15 sites
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 <i>(Please print clearly.)</i>	
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

S:

omitted by Board Secretary or Clerk)

Date Signed

7/9/09