FILED.

## FORM SFEC-126: NOTIFICATION OF CONTRACT APPROVAL

(S.F. Campaign and Governmental Conduct Code § 1.126)

City Elective Officer Information (Please print clearly.)

09 AUG - 6 AM 10: 08

Name of City elective officer(s):	City elective office(s) neta: Elective office(s) neta: Elective office(s) neta:
Members, SF Board of Supervisors	Members, SF Board of Supervisors
Contractor Information (Please printiclearly)	
Name of contractor: Willis Insurance Services of California, Inc.	
Please list the names of (1) members of the contractor's board of dir financial officer, and other operating officers (3) any person who has any subcontractor listed in the bid or contract; and (3) any political	on connecting of 20 test of controlled by the contractor. Use
Donald J. Bailey and Adam L. Rosman. 2) William Mooney is	the Treasurer. 3) No person owns 20% or
more of Willis Insurance Services of Californian Insurance Services is Willis' subconsultant exists that is sponsored or controlled by Wi	. 5) There is no political committee that
Contractor addiess: One Bush Street, 10th Floor, San Francisco, CA 94104	
Date that contract was approved.	Amount of contract:
7/28/2009 (original contract 6/30/05) \$9,051,625	
Describe the namic of the contract that was approved Provide Professional Services to Design, Market, and	
Administer the Guaranteed Owner-Controlled Insurance Program for the Laguna Honda	
Comments: Hospital Replacement Program.	
The Contract has been modified twice by \$894,303 from \$9,051,625 to \$9,945,928.  A third modification, the subject of this amendment, will be contract by \$5,345,055	
A third modification, the subject of this amendment, will be a third and the subject of the subj	
from \$9,945,928 to \$15,290,983. This contract was approved by (check applicable):	
☐ the City elective officer(s) identified on this form  San Francisco Board of Supervisors	
a board on which the City elective officer(s) serves	
Print Name of Board	
□ the board of a state agency (Health Authority, Housing Authority Commission, Industrial Development Authority	
Don't Dorling Authority Redevelopment Agency Commission, Relocation Appeals Doard, Heastle 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:	Contact telephone number:
Clerk of the SF Board of Supervisors	( 415 ) 554-5184
Address: City Hall, Room 244, 1 Dr. Carlton B. Goodlett Pl., SF, CA 94	E-mail: bos.legislation@sfgov.org
City Planting Officer (if submitted by City elective office	er) Date Signed
815109	
ited by Board Secreta	rry or Clerk) Date Signed