

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

City Elective Officer Information <i>(Please print clearly.)</i>	
Name of City elective officer(s): Gavin Newsom	City elective office(s) held: Mayor, City and County of San Francisco
Contractor Information <i>(Please print clearly.)</i>	
Name of contractor: Willis Insurance Services of California, Inc.	
<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>	
1) Willis Insurance Services of California, Inc. Board members – Donald J. Bailey and Adam L. Rosman. 2) Willis Insurance Services of California, Inc. CEO is Paul Gibbs and C. William Mooney is the Treasurer. 3) No person owns 20% or more of Willis Insurance Services of California, Inc. 4) Merriwether & Williams Insurance Services is Willis' subconsultant. 5) There is no political committee that exists that is sponsored or controlled by Willis Insurance Services of California, Inc.	
Contractor address: One Bush Street, 10 th Floor, San Francisco, CA 94102	
Date that contract was approved: 8/6/09	Amount of contract: \$9,051,625
Describe the nature of the contract that was approved: Provide Professional Services to Design, Market, and Administer the Guaranteed Owner-Controlled Insurance Program for the Laguna Honda Hospital Replacement Program.	
Comments: 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 from \$9,945,928 to \$15,290,983.	

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 _____

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

Contact telephone number: (415) 554-5262
E-mail: starr.terrell@sfgov.org

8/7/09
Date Signed

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

Date Signed