

FORM SFEC-126: NOTIFICATION OF CONTRACT APPROVAL FILED

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

City Elective Officer Information (Please print clearly.)	10 LTD - 7 1 LL 4 . 40
Name of City elective officer(s):	City elective office(s) held RANCISCO
Gavin Newsom	Mayor, City and County of San Francisco
	BY
Contractor Information (Please print clearly.)	
Name of contractor: Center on Juvenile and Criminal Justice	
Please list the names of (1) members of the contractor's board of financial officer and chief operating officer; (3) any person who any subcontractor listed in the bid or contract; and (5) any political additional pages as necessary. Board of Directors: Patricia Lee, David Ocegueda Bracker, Wiln Ph.D, Christina L. Stahlkopf, Ph.D.	has an ownership of 20 percent or more in the contractor; (4) ical committee sponsored or controlled by the contractor. Use
Chief Executive Officer: Dan Macallair Chief Financial Officer: Louie Briones International, LLC Chief Operating Officer: Dinky M. Enty, MPA	
Any person who has an ownership of 20 percent or more in the c	ontractor: N/A
Any subcontractor listed in the bid or contract: N/A	
Any political committee sponsored or controlled by the contractor	or: N/A
Contractor address:	
440 9th Street San Francisco, CA 94103	
Date that the contract was approved:	Amount of contract: \$200,000
Describe the nature of the contract that was approved: CJCJ is co youth placed on probation. The IHBS program is a supervision a contact with the child and family and a minimum of three clinical completes probation. This contract has been extended through the youth returning from out of home placement, and to work in particular re-entry programming for placement youth returning to the Comments:	nd clinical case management program that includes daily I hours per week to ensure that the child successfully e Second Chance Act Grant to provide similar services to nership with JPD and the Public Defender's Office to develop
his contract was approved by (check applicable): the City elective officer(s) identified on this form (Mayor,	
a board on which the City elective officer(s) serves <u>San</u>	Print Name of Board
the board of a state agency (Health Authority, Housing Authority, Parking Authority, Redevelopment Agency Commiss Development Authority) on which an appointee of the City experience.	sion, Relocation Appeals Board, Treasure Island

Filer Information (Places print clearly)	t telephone number: 54-5262
	rell@sfgov.org
	Date Signed
ignature of Board Secretary or Clerk (if submitted by Board Secretary or Clerk)	Date Signed

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