

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

FILED

10 FEB 25 PM 12:05

<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

BY \_\_\_\_\_

<b>Contractor Information</b> (Please print clearly.)	
Name of contractor: <b>Tenderloin Housing Clinic, Inc.</b>	
<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> <b>Board of Directors of THC: Phillip Morgan, Chris Tiedemann, Elaine Zamora, Dean Preston, Randy Wilson, Jazzie Collins, Terrie Frye and Otto Duffy</b> <b>CEO of THC: Randy Shaw, CFO of THC: Wynne Tang, COO of THC: Krista Gaeta</b> <b>20% or more owner of THC: none, nonprofit</b> <b>Subcontractors: none for this contract</b> <b>Political committee sponsored or controlled by THC: none</b>	
Contractor address: <b>126 Hyde Street, San Francisco, California 94102</b>	
Date that contract was approved: <b>2/23/10</b>	Amount of contract: <b>82,286,121.00</b>
Describe the nature of the contract that was approved: <b>Supportive Housing – Master lease of 15 Hotel via Housing First</b>	
Comments:	

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

<b>Filer Information</b> (Please print clearly.)	
Name of filer: Clerk of the SF Board of Supervisors	Contact telephone number: ( ) (415) 554-5184
Address: City Hall, Room 244, 1 Dr. Carlton B. Goodlett Pl., SF, CA 94102	E-mail: Board.of.supervisors@sfgov.or

Signature of City Elective Officer (if submitted by City elective officer)	Date Signed
_____ Signature of Board Secretary or Clerk	<b>2/24/10</b> Date Signed