(S.F. Campaig 1 and Governmental Conduct Code § 1.126)

City Elective Officer Information (Please print clearly.)

Name of City elective office(s):

Mayor Gavin Newsom

City & County of SF Supervisors
City & County of SF S

Contractor Information (Please print clearly.) Name of contractor: Catholic Charities CYO		
Name of contractor. Cathoric Charmes C10	(Program: Leland House)	ETHICS COMMISSION
1. BOARD OF DIRECTORS:	•	BV manarest transportation project following the following suppression of the project following programming the following programming programming the following programming th
Most Reverend George Niederauer, Chairman	Mr. Bernard P. Hagan, Sr.	Mr. Robert B. Morris III
Mrs. Cecilia Herbert, President	Mr, James McCabe	Sister Ellene Egan, RSM
Sharon McCarthy Allen	Ms. Nanette Lee Miller, Treasure	r Mr. John A. Knight Ms. Ann Gray Miller
Mr. Carlos A. Alvarez, Secretary	Mr. Stephen Molinelli	Mr. D. Paul Regan
Mr. Nicholas Andrade	Mr. Robert B. McGrath	Rev. Charles Gagan, SJ
Mr. Steven G. Borden	Mr. Mark Okashima Ms. Ann Gray Miller	Mr. Jeffrey Fenton
Mr. Tim Rea	Ms, Ann Gray Maler Mr, William T, Ring	Rev. Kenneth Weare
Kathleen II. Cardinal	Mrs. Rita Semel	Ms. Jacqueline Woodford
Mr. Mark Cleary	Mr. Timothy Alan Simon	Ms. Maureen Sullivan
Rev. Thomas Daly	WIT, Timotity Attiti Billion	Ms. Deborah Dasovich
2. OFFICERS:		
Jeffrey V. Bialik, Executive Director		
Keith Spindle, Director of Finance/CFO		
Contractor address:	00.00.00.00.00.00.00.00.00.00.00.00.00.	
Administrative Offices: 180 Howard Street, Ste. 1	00, San Francisco, CA 94103	Francisco CA 94130
Treasure Island Childcare Center Program Address:	Amount of contra	net: \$52,000
Date that contract was approved:	Amount of contro	(01, \$32,000
07/14/2010	1 to side financial gunnout to CC	SCVO to provide a full day licensed
Describe the nature of the contract that was approve	ed; to provide Thancial support to CC	CTO to provide a run day necrised
childcare center.		
Comments:		
	Marie Control of the	
This contract was approved by (check applicable	s):	
□ the City elective officer(s) identified on this fo		
□ a board on which the City elective officer(s) s	CI'VES Print Name of Board	
Time the state of		Industrial Development Authority
x the board of a state agency (Health Authority,	Flousing Authority Commission,	and Donal Transum Island
Board, Parking Authority, Redevelopment Age	ncy Commission, Relocation App	eals board, Treasure island
Development Authority) on which an appointed	e of the City elective officer(s) rac	entified on this form sits
TOTA SUDE ISLA	ND DEVELOPMENT AUTH	IORITY
Print Name of		
Filer Information (Please print clearly.)		
Name of filer:		ct telephone number:
Frishtah Afifi		5) 274-0688
Address:	E-ma	
		1 (77.63) 11
One Avenue of Palms	frisht	ah.afifi@sfgov.org

Signature of City Elective Officer (if submitted by City elective officer)

Date Signed

7-912-10

Date Signed