FORM SFEC-126: NOTIFICATION OF CONTRACT APPROVAL

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

City Elective Officer Information (Please print clearly.)

FILED

City Elective Officer information (Flease print clearly.)	City election office(s) holds 2010 NOV -2 PH 2: 51
Name of City elective officer(s):	City elective office(s) held:
Members, San Francisco Board of Supervisors	SAH FRANCISCO Members, San Francisco Board of Supervisors IOM
Contractor Information (Please print clearly.)	DY wholespectures and residence and residenc
Name of contractor: Regents of the University of California/ CITYWIDE: program of SFGH/ Department of Psychology	
Please list the names of (1) members of the contractor's board of dire financial officer and chief operating officer; (3) any person who has any subcontractor listed in the bid or contract; and (5) any political of additional pages as necessary. 1) Board: Regents of the University of California	an ownership of 20 percent or more in the contractor; (4)
 2) Chief Executive Officer: Jim Dilley, MD; Chief Financial Officer 3) N/A 4) N/A 5) N/A 	& Chief Operating Officer: Margaret Paternek
Contractor address: San Francisco, CA 94103	
Date that contract was approved: 10/26/2010	Amount of contract: \$213,556
Describe the nature of the contract that was approved: Collaborative agreement with the Department of Rehabilitation, Vocational Services to Consumers in Community Behavioral Health Services (CBHS) Mental Health Programs	
Comments:	
Pri	ancisco Board of Supervisors nt Name of Board
The board of a state agency (Health Authority, Housing Authority, Parking Authority, Redevelopment Agency Commission Development Authority) on which an appointee of the City elections.	n, Relocation Appeals Board, Treasure Island
Print Name of Board	
Filer Information (Please print clearly.)	
Name of filer: Angela Calvillo, Clerk of the Board of Supervisors	Contact telephone number: (415) 554-5184
Address: City Hall, Room 244, 1 Dr. Carlton B. Goodlett Pl., San Francisco, C	E-mail: Board.of.supervisors@sfgov.org
Signature of City Elective Officer (if submitted by City elective office	Date Signed
Signa tted by Board Secretar	ry or Clerk) Date Signed