

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

2010 DEC 16 AM 9:44

City Elective Officer Information (Please print clearly.)	
Name of City elective officer(s): Members, San Francisco Board of Supervisors	City elective office(s) held: Members, San Francisco Board of Supervisors

BY _____

Contractor Information (Please print clearly.)	
Name of contractor: Edgewood Center for Children and Families	
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. 1) Board of Directors: Donna Abrahamson, Lynn Atkinson, Suzanne Baird, John Bell, Luis Belmonte, David Black, Betsy Coover, Denise Dettore, Julie Flynn, Graeme Hanson, Jeannie Harris, Paul Holm, Julene Hunter, Cynthia Lohr, Adrian Sawyer, Brooke Shields, Paul Touchstone 2) CEO: Jeff Davis; CFO/COO: Debra E. Menaker Director of Programs and Strategies: Matt Madaus 3) None 4) Subcontractors: Larkin Street Youth Services, Huckleberry Youth Programs 5) Political Committee: None	
Contractor address: [REDACTED] San Francisco, CA 94116	
Date that contract was approved: 12/7/10	Amount of contract: \$ 29,109,089
Describe the nature of the contract that was approved: Behavioral Health Services	
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

Filer Information (Please print clearly.)	
Name of filer: Clerk of the San Francisco Board of Supervisors	Contact telephone number: (415) 554-5184
Address: City Hall, Room 244, 1 Dr. Carlton B. Goodlett Pl., San Francisco, CA 94102	E-mail: bos.legislation@sfgov.org

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

Date Signed

Si

[REDACTED] ed by Board Secretary or Clerk)

Date Signed

12/14/10