

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

FILED

11 OCT 25 AM 10:06

SAN FRANCISCO
ETHICS COMMISSION

BY _____

City Elective Officer Information (Please print clearly.)	
Name of City elective officer(s): Mayor Edwin M. Lee	City elective office(s) held: Mayor, City and County of San Francisco

Contractor Information (Please print clearly.)	
Name of contractor: Willis Insurance Services of California, Inc.	
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.	
<ol style="list-style-type: none"> 1) Willis Insurance Services of California, Inc.'s Board members are Joseph J. Plumeri and William W. Bradley. 2) Willis Insurance Services of California, Inc.'s Chairman/CEO is Victor Krauze, Michael K. Neborak-Group CFO, Timothy D. Wright-Chairman/Chief Operating Officer. 3) No person owns 20% or more of Willis Insurance Services of California, Inc. 4) Merriweather & Williams Insurance Services is Willis' subconsultant. 5) There is no political committee that sponsored or controlled by Willis Insurance Services of California, Inc. 	
Contractor address: [REDACTED] 10 th Floor, San Francisco, CA 94104	
Date that contract was approved: 10/24/2011	Amount of contract: 17,323,400
Describe the nature of the contract that was approved: Provide Professional Services to Design, Market, and Administer the Guaranteed Owner-Controlled Insurance Program for the Laguna Honda Hospital Replacement Program.	
Comments: Modification #6 is to increase the contract by \$1,940,467 from \$15,382,933 to \$17,323,400.	

This contract was approved by (check applicable):

the City elective officer(s) identified on this form (Mayor Edwin M. Lee)

a board on which the City elective officer(s) serves _____
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: Jason Elliott, Mayor's Liaison to the Board of Supervisors	Contact telephone number: (415) 554-5105
Address: City Hall, Room 200 [REDACTED]	E-mail: Jason.elliott@sfgov.org

Signature of City Elective Officer (elective officer) _____ Date Signed 10/24/2011

Signature of Board Secretary or Clerk (if submitted by Board Secretary or Clerk) _____ Date Signed