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

2012 FEB 22 PH 2: 41

City Elective Officer Information (Please print clearly.)	
Name of City elective officer(s):	City elective office(s) held:
Members, Board of Supervisors	Members, Board of Supervisors
	BY
Contractor Information (Please print clearly.)	
Name of contractor: Blue Shield of California	
financial officer and chief operating officer; (3) any person	ard of directors; (2) the contractor's chief executive officer, chief who has an ownership of 20 percent or more in the contractor; (4) political committee sponsored or controlled by the contractor. Use
(1) members of the contractor's board of directors;	- 현실하는 경험 - 12 등 12 등 전 시간 전
 Bruce G. Bodaken Doug Busch Vanessa Chang Evelyn Dilsaver Hector Flores, M.D. Alan Fohrer William Hauck Sandra Hernandez, M.D. Robert Lee Mohammad H. Qayoumi, Ph.D. 	
(2) the contractor's chief executive officer, chief financ	cial officer and chief operating officer;
Bruce Bodaken, President, Chairman and CEO	
Heidi Fields, Executive Vice President, Chief Financial Of	ficer
Paul Markovich, Executive Vice President, Chief Executiv	ve Officer
(3) any person who has an ownership of 20 percent or m	nore in the contractor;
Blue Shield is a Not-for-Profit Mutual Benefit Corporation.	
(4) any subcontractor listed in the bid or contract; and	

N/A

(5) any political committee sponsored or controlled by the contra	ctor.
Blue Shield of California Political Action Committee	
Contractor address: San Francisco CA 94105	
Date that contract was approved:	Amount of contract:
2/1//12	\$143,048,233 (July 1, 2012 to December 31, 2012)*
Describe the nature of the contract that was approved: Medical Coverage: Blue Shield Traditional HMO and Blue S	hield 65 Plus
Comments: *The amount of this contract is based on the most recent accemployee resignations, new hires, terminations and other actine time of qualifying events.	
the City elective officer(s) identified on this form a board on which the City elective officer(s) serves San France Print Print P the board of a state agency (Health Authority, Housing Authority, Board, Parking Authority, Redevelopment Agency Commission, I Development Authority) on which an appointee of the City elective	Name of Board Y Commission, Industrial Development Authority Relocation Appeals Board, Treasure Island
Print Name of Board	
Filer Information (Please print clearly.)	
Name of filer:	Contact telephone number:
Angela Calvillo, Clerk of the Board	415-554-5184
Address: City Hall, Room 244 1 Dr. Carlton B. Goodlett Pl., San Francisco CA 9	E-mail: 4102 Board.of.Supervisors@sfgov.org
Signature of City Elective Officer (if submitted by City elective officer)	Date Signed
	2/17/12
Signatur ted by Board Secretary of	r Clerk) Date Signed

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