FORM SFEC-126: NOTIFICATION OF CONTRACT APPROVAL

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(S.F. City Elective Officer Information (A	Campaign and Government	al Conduct Code § 1.126)	12 MAR 19 AM 10
Name of City elective officer(s):	rease print creativity	To: 1 1: 65 (2) 11	SANFRANCIS
Name of City elective officer(s):		City elective office(s) held:	FFHICS COMMISS
Maure Fluis M.	Lee	Mayor, City and Count	J
Mayor Edwin M.		· ·	Υ
Contractor Information (Please print	clearly)		
Name of contractor: Public Health Four	ndation Enterprises Inc		
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Please list the names of (1) members of			
financial officer and chief operating off	icer; (3) any person who has	an ownership of 20 percent or mor	e in the contractor; (4)
any subcontractor listed in the bid or co	ontract; and (5) any political	committee sponsored or controlled	by the contractor. Use
additional pages as necessary.			
(1) See attached BOD Affiliation			,
(2) Mark J. Bertler, Chief Executi	ve Officer		•
(3) n/a			
(4) San Francisco Department of I	Public Health	•	• •
(5) n/a	•		
Contractor address	Suite 200, Cit	y of Industry, CA 91746	
	:		•
Date that contract was approved:	1 2012	Amount of contract: \$137,933	
Zato that contract was approved.	/13/2012	Amount of confident. \$137,933	
Describe the nature of the contract that		<u> </u>	
and proposes to continue to maintain a follow up laboratory reports of chron definitions; to complete the viral hepat submit cumulative data monthly to the aboratories testing specimens from the collaborations; to document laboratory follow-up on a 20% sample of persons provider fax-back or interview, medical of existing chronic data; to conduct followarent/guardian and provider interviews complete a summary report; to impleme Sexually Transmitted Diseases Registry complete a 2011 HBV and HCV Annual from labs and SF clinicians over the particular property and experient	tic HBV and markers of Hits case report form on all of CDC via FTP and NETSS; to population under surveilland testing and reporting practices chronically infected with Freedrich record review, or patient into the town on all HBV and HCV; to evaluate testing patterns int, analyze, and summarize in or the California Death Regal Surveillance Report. The st six years of the viral hepartical control of the particular forms.	CV infection using the most cursonfirmed cases of chronic HBV as maintain collaboration and commune; to determine if any labs are not es related to anti-HCV signal to complete the strong at least two serview; to collaborate with CDC or pediatric cases newly reported to Section for chronic HBV and past or present report form a registry match utilitiestry; to participate in CDC coordings SFDPH's successful collaboration it is surveillance project; well-estal	rrent CSTE/CDC case and HCV infection and nunication with clinical reporting and develop ut-off ratio; to conduct of the three methods: a improving the quality FDPH in 2012 through ent HCV infection and zing either the SFDPH nated meetings; and to s and external support plished evaluation plan
urveillance activities in 2012. The SFD			
Health Foundation Enterprises, Inc. base			
Comments:			
	•		
•			4
is contract was approved by (check	applicable):		•
**		vin M. T.aa.\	
he City elective officer(s) identified			^ 1
board on which the City elective o	fficer(s) serves San Fra	ncisco Board of Supervisors	
		Name of Board	

Print Name of Board

□ the board of a state agency (Health Authority, Housing Authority (Board, Parking Authority, Redevelopment Agency Commission, Re Development Authority) on which an appointee of the City elective	location Appeals Board, Treasure Island	
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	E-mail: Jason.elliott@sfgov.org	
Signature of City Elective y elective officer)	3/13/2017 Date Signed	
Signature of Board Secretary or Clark (if submitted by Board Secretary or	Clark) Data Signed	



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Term for 2011-2012

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