Date Signed

FORM SFEC-126:

NOTIFICATION OF CONTRACT APPROVAL FILED (S.F. Campaign and Governmental Conduct Code § 1.126) City Elective Officer Information (Please print clearly.) 2014 AUG -4 City elective office(s) held: Name of City elective officer(s): SAN FRANCISCO Members, Board of Supervisors THICS COMMISSION Members, Board of Supervisors Contractor Information (Please print clearly.) Name of contractor: 1145 Market Street L.P., a California Limited Partnership 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. None Vijay Patel & Ramilaben Patel 3. Hemant Patel (20%) 4. None None. Contractor address: San Francisco, CA 94121 Date that contract was approved: Amount of contract: 7/29/14 \$8,743,379.80 (Maximum) over 10 years Describe the nature of the contract that was approved: Lease extension for the Empress Hotel at 144 Eddy St. for the Department of Public Health 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: Contact telephone number: Angela Calvillo, Clerk of the Board (415) 554-5184 E-mail: Address: City Hall, Room 244, 1 Dr. Carlton B. Goodlett Pl., San Francisco, CA 94102 Board.of.Supervisors@sfgov.org Signature of City Elective Officer (if submitted by City elective officer) Date Signed

Signature of Board Secretary or Clerk (if submitted by Board Secretary or Clerk)