File No. 13/048	Committee Item No
COMMITTEE/BOA	RD OF SUPERVISORS
AGENDA PAC	KET CONTENTS LIST

Committee:	Rules Committee	Date October 31, 2013
Board of Su	pervisors Meeting	Date
Cmte Boar	·d	
	Motion Resolution Ordinance Legislative Digest Budget and Legislative Analyst Re Youth Commission Report Introduction Form Department/Agency Cover Letter MOU Grant Information Form Grant Budget Subcontract Budget Contract/Agreement Form 126 – Ethics Commission Award Letter Application Public Correspondence	
OTHER	(Use back side if additional space	is needed)
	Form 700	
Completed b		ate October 28, 2013

Assessment Appeals Board City and County of San Francisco (415) 554-6778 Fax (415) 554-6775



City Hall, Room 405 1 Dr. Carlton B. Goodlett Place San Francisco, CA 94102-4697

Revised July 2013

Complete and return this original Application to the Assessment Appeals Board
Application for Appointment to: (Please circle one) Board 1 Board 2 Board 3 Or Board 1 Alternate JUL 3 0 2013 Board 3 Alternate Enter your name, mailing address and daytime telephone number in the spaces provided. Because this form is a line of the spaces provided. Because this form is a line of the spaces provided. Because this form is a line of the spaces provided.
Enter your name, mailing address and daytime telephone number in the spaces provided. Because this form is a document available other personal contact information.
Do you authorize release of your private/personal information?
Name: MERVIN T. CONLAN Home Addres - 16 42 AVE
City: SAN FRANCISCO State: CA Zip code: 94/18
Business Address: 333-16th AVE City: 5F State: CA Zip Code: 9418
Home Phone: 15- rk Phone: 15-751-6/32 Fax #:
Pager #: E-Mail Address: @ SBC GLobaLrNel
Are you a United States citizen, or a resident alien who is eligible for and has applied for citizenship? X Yes \(\square\) No
Have you ever been convicted of a felony in this state, or convicted of any offense which, if committed in this state, would be a felony? Yes No (If yes, please attach a statement describing the offense(s) for which you have been convicted, the date of the conviction(s), and the court(s) that convicted you.)
Pursuant to Ordinance No. 393-98 the following qualifications are required:
A person shall not be eligible for nomination for membership on an assessment appeals board unless he or she has a minimum of five years' professional experience in this state as one of the following: (1) certified public accountant; (2) licensed real estate broker; (3) attorney; or (4) property appraiser accredited by a nationally recognized professional organization, or property appraiser certified by either the Office of Real Estate Appraiser or by the State Board of Equalization. Documentation of qualifying experience must be submitted with this application form. This requirement does not apply to incumbent board members nominated for appointment to their same seats.
Please state your qualifications: Real Estate Licensed Broker & Appraiser
Please state your business and/or professional experience: OVER 75 475 Real Estate
Occupation: RAL Estate Broken Education: BA college degles
Civic Activities:
Ethnicity (optional): Sex (optional): MM F
Other Personal Information (optional)
Would you be able to attend Day Meetings? Yes No Evening meetings? Yes No How many days a week would you be available for hearings? How many evenings a week? How many evenings a week?
Appearance before the RULES COMMITTEE is a requirement before any appointment can be made. Please Note: Your application will be refained for one year.
Date: 7/26/13 Applicant's Signature:
For Office Use Only: Appointed to Board #: Seat #: Term Expires:

DBMGPSÖ.BIGPSN 81 GESIGPKULDENGSBULDFTIGPNNATI BIGVCMDIEPDVNFOL

STATEMENT OF ECONOMIC INTERESTS

Ebul 1 Sf of jwl e

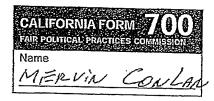
RECEIVED COVER PAGE BOARD OF SUPERVISORS SAN FRAMCISCO

PI	ease type or print in ink.
NA	ME OF FILER (LAST) (FIRST) COLUMN TO HARDES
	CONLAN MERVIN ON LANGITUS
1.	Office, Agency, or Court
	Agency Name
	20 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m
	District Property of the Prope
	Tour Position
	MSSESSMEN APPEALS GOARD BRAND MEMBER
	▶ If filing for multiple positions, list below or on an attachment.
•	Agency:
	Position:
2.	Jurisdiction of Office (Check at least one box)
	☐ State ☐ Judge or Court Commissioner (Statewide Jurisdiction)
	Multi-County
	TIGHT STATE
	Gity of
3.	Type of Statement (Check at least one box)
	Annual: The period covered is January 1, 2012, through
	December 31, 2012. (Check one)
	The period covered is, through O The period covered is January 1, 2012, through the date of
	December 31, 2012. leaving office.
	Assuming Office: Date assumed
	Candidate: Election year and office sought, if different than Part 1:
4.	Schedule Summary
	Check applicable schedules or "None." ➤ Total number of pages including this cover page:
	For the first of t
	TS of the date of mounts, coalis, a business Positions – schedule attached
	Ed out the Double attacked
	42 School 2 - Moone - Gills - Haver Payments - schedule attached
	-or- None - No reportable interests on any schedule
5. \	Verification
. '	MAILING ADDRESS STREET CITY
	(Business or Agency Address Recommended - Public Document) STATE ZIP CODE
	DAYTIME TELEPHONE NUMBER
)1111111114/15-751-6132 SBCGLobal, NET
1	I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.
	certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
	2/28/13
ł	Date Signed

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.



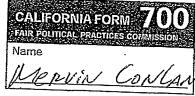
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
	The state of bookings tivili
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	
OCHEROLE DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
	<u> </u>
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	
-	S100,001 - \$1,000,000 · Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF ADDITIONS A AND AND AND AND AND AND AND AND AND A	
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ / 12 / / 12	
// 12/ 12 - ACQUIRED DISPOSED	<u> </u>
VOGQUYER DISPOSER	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
•	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	
GEMERAL DESCRIPTION OF BOSINESS WOUNTY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE	EAID MADKET MAKE
S2,000 - \$10,000	FAIR MARKET VALUE
\$100,001 - \$1,000,000 Over \$1,000,000	\$2,000 - \$10,000 \$10,001 - \$100,000
	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF BUILDING
Stock Other CON POTA 18. 100 AVGS	NATURE OF INVESTMENT
(Describe)	Stock Other (Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
•	the frequency
IF APPLICABLE, LIST DATE:	1-1-1-1
	IF APPLICABLE, LIST DATE:
// 12/ 12	// 12 / / 12
ACQUIRED DISPOSED	ACQUIRED DISPOSED
	Nodowen Dishozen
➤ NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
	· · · · · · · · · · · · · · · · · · ·
GENERAL DESCRIPTION OF BUSINESS ACTIVITY .	
DENEMAL DESCRIPTION OF BESINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
	'.
	·
FAIR MARKET VALUE	FAIR MARKET VALUE
S2,000 - \$10,000 × \$10,001 - \$100,000	S2,000 - \$10,000 S10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	
	S100,001 - \$1,000,000 Over \$1,000,000 .
NATURE OF INVESTMENT 11 - R	NATURE OF INVESTMENT
Stock Other / 1001 / 07147	Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF ADDITIONAL F. LICT DATE	
IF APPLICABLE, LIST DATÉ:	IF APPLICABLE, LIST DATE:
/ / 12 / / 12	
ACQUIRED DISPOSED	12 / 12
יוסקטוובטי טוטו טטבט	ACQUIRED DISPOSED
Comments:	•

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)

CALIFORNIA E	-08M 7/0/A	
FAIR POLITICAL PRA	CTICES COMMISSION	
Name		225
MERVIN	CONIAL	

1. BUSINESS ENTITY OR TRUST	►12 BUSINESS ENTITY OF TRUST
Name Applaisers	
333-16 th Abs SF CA 94118	Name :
Address (Business Address Acceptable) Check one	Address (Business Address Acceptable)
☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2	Check one Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
12 EAL 75/A/P AppraiaL	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
S2,000 - \$10,000/_ / 12 / 12	\$3.000 \$1,999
\$10,001 - \$100,000 ACQUIRED DISPOSED	\$10,001 - \$100,000 ACQUIRED DISPOSED
Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Partnership Sole Proprietorship Other	Partnership Sole Proprietorship
YOUR BUSINESS POSITION OWNER	Other
SZEIDENTIFY THE GROSS INCOMES DECEMBER VINCTURE VOLUMENTON	YOUR BUSINESS POSITION
2: IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITYTRUST)
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ OVER \$100,000	□ \$0 - \$499 □ \$10,001 - \$100,000
S1,001 - \$10,000	\$500 - \$1,000
➤ 3.5 LIST: THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Allego 3 separate sheet if recessory)	3. LIST THE NAME OF FACE REPORTABLE CINCLE CONCRETE
None	INCOME OF SID,000 OR MORE; (Autoch a separate shear (Facessary)
▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	A. INVESTMENTS AND INTERESTS IN DEAL BRODERTY HELD AND
Crieck one box:	▶ 4: INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity if Investment or	
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or	
City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000
S100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000	\$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Padnership	NATURE OF INTEREST
	Property Ownership/Deed of Trust Stock Partnership
Leasehold Yrs. remaining Other	Leasehold Ciher
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments Five of Inserts Datite of	SAR FRANCÍSCO FPPC Form 700 (2012/2013) Sch. A-2
opinions	FPPC Advice Email: advice@fooc ca nov
	FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE B Interests in Real Property (Including Rental Income)



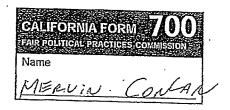
► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	
The state of the s	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
CITY	
5.11	CITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	
\$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$10,001 - \$100,000 / /12 / 12	\$10,001 - \$100,000//12//12
\$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000	\$100,001 - \$1,000,000 ACQUIRED DISPOSED
[] Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST .	NATURE OF INTEREST
Cwnership/Deed of Trust Easement	Ownership/Deed of Trust
Leasehold	D toutet
Yrs. remaining Other	Leasehold
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	55.51
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
S10,001 - \$100,000 OVER \$100,000	\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
	S10,001 - \$100,000 DVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater	SOURCES OF RENTAL INCOME: If you own a 10% or greater
interest, list the name of each tenant that is a single source of income of \$10,000 or more.	interest, list the name of each tenant that is a single source of
None	income of \$10,000 or more.
	□ None
_ <u> </u>	
You are not required to report loans from commercial ler business on terms available to members of the public will	ording institutions made in the Land
loans received not in a lender's regular course of busine	iss must be disclosed as follows:
NAME OF LENDER*	
TANKE OF CEREBER	NAME OF LENDER*
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
·	, second y isospicancy
BUSINESS ACTIVITY, IF ANY, OF LENDER	DIGUES
The state of the s	BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
% None	<u> </u>
	% None
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
S500 - \$1,000	\$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
Guarantor, if applicable	The state of the s
	Guarantor, if applicable
Yersand Docila	San Francisco of
properties outside 9 SF	SANFRANCISCO; PENTAL
properties outside 9 SF	FPPC Form 700 (2012/2013) Sch. 8
	FPPC Advice Email: advice@fonc ca gov
	FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE C Income, Loans, & Business Positions (Other than Gifts and Travel Payments)



► It INCOME RECEIVED	▶ 1.INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
CONLAN Appraisers	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
233-16 AUS St.	(посрыване)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Real 25 Tate Apara Zer	THE TAIL OF SOURCE
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
OWNER-	10011012
GROSS INCOME RECEIVED	
\$500 - \$1,000 S1,001 - \$10,000	GROSS INCOME RECEIVED
\$10,001 - \$100,000 OVER \$100,000	S500 - \$1,000 S1,001 - \$10,000 S10,000 OVER \$100,000
CONDIDED INTO HOLD HAVE	☐ 07ER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED Salary Spouse's or registered domestic partner's income	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
The state of the s	Salary Spouse's or registered domestic partner's income
Loan repayment Pannership	Loan repayment Partnership
Sale of(Real property, car, boat, etc.)	Sale of
	(Real properly, car, boat, etc.)
Commission or Rental Income, fist each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
octide of SF	
Tother PP2414 in 9 (Describe)	
(Describo)	Other (Describe)
	(execute)
> 2. LOAMS RECEIVED OR OUTSTANDING DURING THE REPORTING PER	10D
	nding institutions, or any indebtedness created as part of a
rotal instantient of credit cald transaction, mane in the	lender's regular course of business an tarres and
miorisons of the babile without redain to Aont Ollicial Sis	IUS. Personal loans and loans received not in a landaria
regular course of business must be disclosed as follows	5:
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)	% None
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	☐ None ☐ Personal residence
MICHEST DAI AMOS DADDIG DEDORANO DEDORANO	Real PropertyStreet address
HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000	ones, cours
	City
\$1,001 - \$10,000	Guarantor
\$10,001 - \$100,000	
OVER \$100,000	Other
	`(Describe)
	•
Comments:	

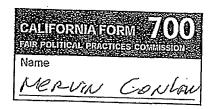
SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements



- You must mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization
 or the "Speech" box if you made a speech or participated in a panel. These payments are not
 subject to the \$440 gift limit, but may result in a disqualifying conflict of interest.

► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)	BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
DATE(S):/	DATE(S)://///
TYPE OF PAYMENT: (must check one) Gift Income	TYPE OF PAYMENT: (must check one) Gift Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND, STATE	CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)	BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
DATE(S):/ AMT: \$	DATE(S):/
TYPE OF PAYMENT: (must check one) Gift Income	TYPE OF PAYMENT: (must check one) Gift Income
☐ Made a Speech/Participated in a Panel ☐ Other - Provide Description	☐ Made a Speech/Participated in a Panel☐ Other - Provide Description
Comments: NOME	

SCHEDULE D Income - Gifts



NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
	\$
VAME OF SOURCE (Not an Acronym)	
ADDRESS (Business Address Acceptable)	► NAME OF SOURCE (Not an Agronym)
	ADDRESS (Business Address Acceptable)
USINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
ATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
	s
	\$
AME OF SOURCE (Not an Acronym)	NAME OF SOURCE (Not an Acronym)
DDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
USINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
ATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
//	\$
-//	\$
\$	
mments: None	• .

Assessment Appeals Board City and County of San Francisco (415) 554-6778 Fax (415) 554-6775



City Hall, Room 405 1 Dr. Carlton B. Goodlett Place San Francisco, CA 94102-4697

Revised July 2013

Complete and return this original Application to the Assessment Appeals Board
Application for Appointment to: Board 1 or Board 1 Alternate (Please circle one) Board 2 or Board 3 Alternate Board 3
Enter your name, mailing address and daytime telephone number in the spaces provided. Because this form is a document available other personal contact information.
Do you authorize release of your private/personal information?
Name: ALTREDO GREETHOME Address: - THOREMOINE ST.
City: 5 = Zip code: 941/2
Business Address: — SETHE City: State: Zip Code:
Home Phone: 4/5) 554-(728 For #64/5)
Pager # (415) = E-Mail Address: = 3 Yalvar, C. Stey
Are you a United States citizen, or a resident alien who is eligible for and has applied for citizenship? Yes No
Have you ever been convicted of a felony in this state, or convicted of any offense which, if committed in this state, would be a felony? Yes No (If yes, please attach a statement describing the offense(s) for which you have been convicted, the date of the conviction(s); and the court(s) that convicted you?
Pursuant to Ordinance No. 393-98 the following qualifications are required:
A person shall not be eligible for nomination for membership on an assessment appeals board unless he or she has a minimum of five years' professional experience in this state as one of the following: (1) certified public accountant or public accountant; (2) licensed real estate broker; (3) attorney; or (4) property appraiser accredited by a nationally recognized professional organization, or property appraiser certified by either the Office of Real Estate Appraiser or by the State Board of Equalization. Documentation of qualifying experience must be submitted with this application form. This requirement does not apply to incumbent board members nominated for appointment to their
Please state your qualifications: B. B.A U.E PHILS, /ACCTG. MAJOR; VAR. UNIVERSITIES - CONTINUING EDUCATION (USA)
Please state your business and/or professional experience: ACCOUNTANT & DED
Occupation: C, P, A SC PHILES & STATE OF Education: TS.B. A - ACCTE MANILLA, PH
Civic Activities: PICPA-DIRECTUR, KOCC-4th DECREE.
Ethnicity (optional): 下以PINO Sex (optional): 図M 口F
Other Personal Information (optional)
Would you be able to attend Day Meetings? Yes No Evening meetings? Yes No How many days a week would you be available for hearings? How many evenings a week? Have you attended an Assessment Appeals Board meeting? Yes No
Appearance before the RULES COMMITTEE is a requirement before any appointment our bound
Please Note: Your application will be retained for one year. Applicant's Signature: Applicant
For Office Use Only: Appointed to Board #: Seat #: Term Expires:

CALIFORNIA FORM 700 TAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT.

STATEMENT OF ECONOMIC INTERESTS RYISORS SAN FRANCISCO COVER PAGE 13 HAR 29 PH 3: 17

Date Received

Please type or print in ink.

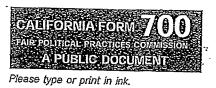
NAM.	LAST) (FIRST) . PA		
	TEREZ ALERGA	(MIDDLE)	
	Office, Agency, or Court	(
į	Agency Name	· · · ·	
Ī	Division, Board, Department, District, if applicable Your Position		•
_	1505mont Arous Dona		
.)	► if filing for multiple positions, list below or on an attachment.		_
	Agency: Position: N/A.	T. T.	
2.	Jurisdiction of Office (Check at least one box)	32 10	<u>, </u>
·- ·F	Qfofo.		7
: L	Judge or Court Commissioner (Statewick	Jurisdiction)	5
	☐ Multi-County ☐ County of ☐ County of ☐ Other ☐ Other ☐		
بر ـــــ	2) City or Dither	\$ 5 E	_
3,- 7	Type of Statement (Check at least one box)		_
	Annual: The period covered is January 1, 2011, through December 31, 2011. Check one)		·.
	The period covered is, through O The period covered is January 1, 20 December 31, 2011.	11, through the date of	•
]. D	Assuming Office: Date assumed Office separate	/ through	
· ·	ossiq a dinerent upin ratt I:		-
4. C	Schedule Summary		-
-	theck applicable schedules or "None." ➤ Total number of pages including this cover	page:	
		•	
	Schedule B - Pool Property in the lattice of the schedule attack	ed ·	•
•	Schedule E - Income - Gifts - Travel Payment	s - schedule attached	•
	None - No reportable interests on any schedule		
i. Ve	erification (
147	AF ING ADDRESS PROFIT		_
113	Street CITY: STATE Street or Agency Address Recommended - Public Documents	ZIP CODE	
	EPHONE NUMBER [E-WAL APDRESS (OPTIONAL)	94112	
<u>{</u>	4/5)		
. Ih	have used autreasonable congenies in properties and logical have reviewed this statement and to the best of my knowledge arein and in any attached schedules is true and complete. I acknowledge this is a public decument	the information contained	
· Ic	erein and in any altached schedules is true and complete. I acknowledge this is a public document. Certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.		
Da	ate Signed 3/12/13 Signature Signature	Re,	-
	(File Die onglinally signed statement with you	ting pictal)	_
•	•		_

Assessment Appeals Board City and County of San Francisco (415) 554-6778 Fax (415) 554-6775



City Hall, Room 405 1 Dr. Carlton B. Goodlett Place San Francisco, CA 94102-4697

Complete and return	this original Application to the Assessment Appeals Board
Application for Appointr (Please circle one)	ment to: Board 1 or Board 4 Attached
Enter your name, mailing address and dayting for public review, you may list your business other personal contact information.	ime telephone number in the spaces provided. Because this form is a document available s/office address, telephone number and e-mail address in lieu of your home address or
Do you authorize release of your private	e/personal information? 🗵 yes 🔲 no
Name: Macaaret N. Ruxte	on Home Address: Greenwich Street
City: San Francisco	State: <u>CA</u> Zip code: <u>94/23</u>
Business Address: 1737 Union	Street City: 5 F State: CA Zip Code: 94123
Home Phone:	2011
Pager#:	Work Phone: 377.3416 Fax#: 771.93.50. E-Mail Address: Glomoust. net
Are you a United States citizen as a see	acomean.
The second office offices, of a fest	sident alien who is eligible for and has applied for citizenship? 🗵 Yes 🗌 No
	ny in this state, or convicted of any offense which, if committed in this state,
the date of the conviction(s), an	nt describing the offense(s) for which you have been convicted, and the court(s) that convicted you.)
Pursuant to Ordinance No. 393-98 the	of following qualifications are required:
nationally recognized professional organ Appraiser or by the State Board of Equal application form. This requirement does same seats. Cernr	isional experience in this state as one of the following: (1) certified public ensed real estate broker; (3) attorney; or (4) property appraiser accredited by a mization, or property appraiser certified by either the Office of Real Estate elization. Documentation of qualifying experience must be submitted with this is not apply to incumbent board members nominated for appointment to their enisting assistant appears to the enisting and the enisting as the enisting and the enisti
Please state your business and/or profes	ssional experience: Rial Estate Broker specializing (multi-unit and single family). Practiced real estate law,
Occupation: Seal Estate Broker /	Atterney Education Duki School of Law TA 1981
BUSINISS COUNCIL Ethnicity (optional): <u>Cau casian</u>	Sex (optional): M & F Partnersh
Other Personal Information (optional)	The meisting
Would you be able to attend Day Meeting How many days a week would you be av Have you attended an Assessment Appe	/ailable for hearings? 5 How many evenings a week? 5
Appearance before the RULES	COMMITTEE is a requirement before any appointment can be made
7 10 /2 /22	Applicant's Signature: Manageret N. Colv. C.
For Office Use Only: Appointed to Board	



STATEMENT OF ECONOMIC INTERESTS

Date Received Official Use Only

FICOVER PAGE

NAME OF FILER (LAST) 13 RUXTON (LAST)	Mark - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	(FIRST)	0:1:	(MIODLE)	
1. Office, Agency, or Court	THICS PART	E Emay	Niels	sen	
Agency Name		,	•		
Board of Supervisors Division, Board, Department, District, if applicable		BOArd Me Your Position	em bei	- B O	
ASSESSMENT Appeals	Board	TOUR POSITION		SAN R	
→ If filing for multiple positions, list below or on an attachment.				N 23 0	
Agency:		Position:		Super Super	
2. Jurisdiction of Office (Check at least one box)				<u> </u>	CHOMA .
☐ State	_ [Judge or Court Commissi	oner (Statowida, i	Urindialism (7)	
Multi-County	· £	X County of <u>San</u>	Francis	disdiction)	
Excity of San Francis OD.		Other			- ·
3. Type of Statement (Check at least one box)					
Annual: The period covered is January 1, 2012, through December 31, 2012.		Leaving Office: Date Le (Check one)	ft/	-	
The period covered is/	_, through	O The period covered is leaving office.	January 1, 2012,	through the date of	•
Assuming Office: Date assumed	<u>. </u>	O The period covered is the date of leaving off		through	
Gandidate: Election year and office	e souaht, if different	than Part 1:	ce.		•
Schedule Summary	and the same of the	didir att 1.			
Check applicable schedules or "None."	▶ Total numb	er of pages including	this cover pa	ge: <u> </u>	Taka) .
Schedule A-1 - Investments - schedule attached	,	edule C - Income, Loans, &			
Schedule A-2 - Investments – schedule attached	Sche	edule D - Income - Gifts -	schedule attached	e – scriednie attaciled	
Schedule B - Real Property - schedule attached	Sche	edule E - Income — Giffs —	Travel Payments -	schedule attached	
-or- ☐ None - <i>No report</i>		-	٠	•	
Verification					oct .
MAILING ADDRESS STREET Address Recommended - Public Document)	СПҮ	STATE	ZIP	CODE	
Greenwich St. SF	- CA 9	14123			
OAYTIME TELEPUTATE MINDED (4/5)	E-MAIL AD	DDRESS (OPTIONAL)		•	
I have used all reasonable diligence in preparing this statement. Li	have reviewed this s	statement and to the best of	my knowledge the	information contained	
herein and in any attached schedules is true and complete. I ack	aromicage this is a f	Dublic accument			
3/26/12	or outhornic that the	the foregoing is true and co	orrect	, six	
Date Signed (month, day, year)	Signature_	11 agares	11, ICW	V	
		is no one suithment signed	i sialemeni with your filing	official.) Form 700 (2012/2013)	_ ^Q
	•	FF FPPC Toll-Free H	PC Advice Email	t: advice@fppc.ca.gov 1772 www.fppc.ca.gov	ON.
			•		

SCHEDULE B Interests in Real Property (Including Rental Income)

ACAMIECEMIA SOPREMENTAL	A
TAIR POLITICAL PRACTICES COMMISSIO	No.
Name	KIMO.N.
Manage	
MXDN LOLLANDER IN	1

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	A ACCECCODE DA PORTA ANALYSIA
	ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
1370 Washington Street	
San Francisco	СПУ
FAIR MARKET VALUE	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
\$100,001 - \$1,000,000 ACQUIRED DISPOSED	\$10,001 - \$100,000/
Over \$1,000,000	S100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust	Ownership/Deed of Trust Easement
Leasehold	Leasenold
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	Yrs. remaining Other
\$0 - \$499 \$500 - \$1,000 \$7,001 - \$10,000	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
S10,001 - \$100,000 ØOVER \$100,000	\$0 - \$489 \$500 - \$1,000 \$1,001 - \$10,000
	\$10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
None Jordan Relse, Katherine Foster	None
Grace Warrick Samantha Cronin, Sam Cronin, Gracie Childress, Alajna Kretchnes	
Cronin Gracie Childress, Alajna Kretchner	
Tennifer Pearle Kathryn Cullen Tilki Kimball Damien Thivent Rebecca	
More hizer, Jason whilen Benjamin.	
Liebald	
* You are not required to report loans from commercial let business on terms available to members of the public w	nding institutions made in the lender's regular course of
loans received not in a lender's regular course of business	ess must be disclosed as follows:
NAME OF LENDER*	NAME OF LENDER*
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CHENTER	
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/years)	
- Control (control (c	INTEREST RATE TERM (Months/Years)
% None	%
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000 .
Guarantor, if applicable	Guarantor, if applicable
	· .
omments:	•

SCHEDULE C Income, Loans, & Business Positions (Other than Gifts and Travel Payments)

CALIF	ORNI	A FORN		
FAIR POL	HICAL	PRACTICES	COMMI	SION
Name	•	,	_	**************************************
Ma	rgas	et N	Ra	Xton

PANE OF COURSE PANEL	Lesaincomereceived:
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
City Living SF	Charge Across Town
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
1737 Union Street, SF	950 Battery Street 5 1/2
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANYLOF SOURCE
Real Estate Brokurage.	
TOUR BOSINESS POSITION	YOUR BUSINESS POSITION (3 COUP)
Broker.	Development Manager.
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
S500 - \$1,000 S1,001 - \$10,000	
S10,001 - \$100,000 OVER \$100,000	\$500 - \$1,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	1
Salary . Spouse's or registered domestic partner's income	CONSIDERATION FOR WHICH INCOME WAS RECEIVED Salary Spouse's or registered domestic particles in account.
Loan repayment Partnership	- 1 - 1-3 and domestic partier 5 income
Sale of	
(Real property, car, bost, etc.)	Sale of(Real property, car, boal, etc.)
CCCommission or Rental Income, list each source of \$10,000 or more	•
	Commission or Rental Income, list each source of \$10,000 or more
Other	Other Consulting Fee (Describe)
(Describe)	(Describe)
28 LOANS REGEIVED OR GUITS TANDING DURING THE REPORTING PERIO)D
You are not required to report loans from commercial len	iding institutions, or any indebtedness created as part of a
retail installment or credit card transaction, made in the limembers of the public without regard to your official state	ender's regular course of business on terms available to
members of the public without regard to your official state regular course of business must be disclosed as follows:	
a manage made to disclosed as follows:	
NAME OF LENDER	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)	% None
•	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	☐ None ☐ Personal residence
HIGHEST BALANCE DURING REPORTING PERIOD	Real PropertyStreet address
\$500 - \$1,000	•
\$1,001 - \$10,000	Cây
\$10,001 - \$100,000	Guarantor
OVER \$100,000	•
-	Other
• • • • • • • • • • • • • • • • • • •	
•	(Describe)
Commonte	(Describe)
Comments:	(Describe)

SCHEDULE C Income, Loans, & Business Positions (Other than Gifts and Travel Payments)

	CAULTO	OMITA DE		MAYA
į				
	FAIR PDEITH	ALPRACI	ICES COM	MSS (OIL)
]	Name	•	*********	******
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ı	ONDIVE	anot	1111/	tm
Ĺ	11000	SN AV	7 MOS	1101
	•	t		

MAME OF SOURCE OF MOONE	ZASINGOMERIGENIEG
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
Evolve Discovery	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
· Mission Street, SF	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION.	or osolice
YOUR BUSINESS POSITION.	YOUR BUSINESS POSITION
Altorners.	, see a see
GROSS INCOME RECEIVED	
\$500 - \$1,000 S1,001 - \$10,000	GROSS INCOME RECEIVED
S10,001 - \$100,000 OVER \$100,000	\$1,000 \$1,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000
	S10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income	Salary Spouse's or registered domestic partner's income
Loan repayment Partnership	Loan repayment Partnership
Sale of	Sale of
(Real property, car, boat, etc.)	(Real property, car, boat, etc.)
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental income, list each source of \$10,000 or more
	Income, lest each source of \$10,000 or more
Blother Consulting Flo	Other
(Sesalue)	(Describe)
 Caranasared in English of the Commission	·
* Vou or and an)
* You are not required to report loans from commercial lend retail installment or credit card transaction, made in the le	ding institutions, or any indebtedness created as part of a
members of the public without regard to your official statu regular course of business must be disclosed as follows:	s. Personal loans and loans received not in a lender's
	•
NAME OF LENDER	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)	% . None ·
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	☐ None ☐ Personal residence
HIGHEST BALANCE DURING REPORTING PERIOD	Real PropertyStreet address
\$500 - \$1,000	*
\$1,001 - \$10,000	City
<u>.</u>	Guarantor
\$10,001 - \$100,000	
OVER \$100,000	Other
	(Describe)
Comments:	

4m.8/27

Assessment Appeals Board City and County of San Francisco (415) 554-5184 Fax (415) 554-5163



City Hall, Room 244 1 Dr. Carlton B. Goodlett Place San Francisco, CA 94102-4697

Revised May 2008

Complete and return this original Application to the Clerk of the Board of Supervisors
Application for Appointment to: Board 1 or Board 1 alternate (Please circle one) Board 2 or Board 2 alternate
Enter your name, mailing address and daylime telephone number in the spaces provided. Because this form is a document available for public review, you may list your business/office address, telephone number and e-mail address in fleu of your home address or other personal contact information.
Do you authorize release of your private/personal information?
Name: KODIA (VISD Home Address: - Collins Street
City: Van Francisco State: CA: Zip code: 94118
Manatt Phologiphalities Business Address: CM Davcadeno Center, 30th fl. San Francisco State: CA Zip Code: 9411
Home Phone (415) Work Phone: (415)291-7462_Fax#:
Pager#: E-Mall Address: @ manatt.com
Are you a United States citizen, or a resident allen who is eligible for and has applied for citizenship? X Yes No
Have you ever been convicted of a felony in this state, or convicted of any offense which, if committed in this state,
(If yes, please attach a statement describing the offense(s) for which you have been convicted, the date of the conviction(s), and the court(s) that convicted you.)
Pursuant to Ordinance No. 393-98 the following qualification with the control of
public accountant or public accountant tropped are experience in this state as one of the following: certified
by a nationally recognized professional organization, or property appraiser certified by either the Office of Real Estate Appraiser or by the State Board of Equalization, Decreased to the Control of the Office of
submitted with this application form. This requirement does not apply to incumbent board members nominated for appointment to their same seats.
Please state your qualifications: Licensed member of the California State Bar Since December 2003 (9 years) #227198.
Please state your business and/or professional experience: Land Use attorney in San Francisco.
Decupation: Attorney . Education: B.A. UCDavis Jehool of Law.
ivic Activities: Member Supporter of Golden Gate National Parks Conservancy
ithnicity (optional): Kovean American Sex (optional): M XF
other Personal Information (optional) See attached resume
Vould you be able to attend Day Meetings? Yes No Night meetings? Yes No Night meetings? Yes No ave you attended an Assessment Appeals Board meeting? Yes No
Appearance before the RULES COMMITTEE is a requirement before any appointment on the
Please Note: Your application will be retained for one year. Applicant's Signature: Note Curs
The other state of the same of
Seat # Seat # Term Express

ROBIA SOOK CRISP

Collins Street • San Francisco, CA 94118• (415) @gmail.com

BAR ADMISSION

California State Bar, December 2003

WORK EXPERIENCE

June 2012-

UPDATE LEGAL

present

MANATT PHELPS AND PHILLIPS

San Francisco, CA

Contract Land Use Associate

Assist in the representation of a broad range of clients in land use matters. Regularly appear before local decisionmaking bodies throughout the Bay Area in connection with obtaining discretionary approvals.

June 2006-

MILLER STARR REGALIA

Walnut Creek, CA

June 2012

Land Use Associate

Represented clients in all phases of entitlement processing, including compliance with CEQA and regularly appearing before local governmental bodies throughout Northern California. Assisted in representation of national big box retailer and interfaced with staff and technical consultants to develop a comprehensive administrative record. Provided land use advice to a global healthcare company operating a large campus in the East Bay. Conducted land use due diligence research in connection with site acquisitions. Drafted contracts, deeds, easements, and other legal documents in connection with real estate transactions. Administrative law experience in obtaining alcoholic beverage sales permits on behalf of two national drugstore companies. Projects included handling two hearings before administrative law judges, both resulting in favorable decisions.

Sept. 2006-

DOWNEY BRAND LLP

Sacramento, CA

June 2006;

Water Law Associate; Summer Associate

Summer 2002

Assisted in representing public and private clients on a broad range of issues involving water law. Advised public agency clients regarding compliance issues under the Brown Act, Political Reform Act, and Public Records Act. Assisted in representing amicus curiae water association and prepared appellate brief on issue of priority of water rights, resulting in favorable decision in El Dorado Irrigation Dist. v. State Water Resources Control Bd. (2006) 142 Cal. App. 4th 937. Represented private landowners in a water right dispute and drafted appellate briefs resulting in a favorable decision in Barnes v. Hussa (2006) 136 Cal.App.4th 1358.

EDUCATION

May 2003

University of the Pacific McGeorge School of Law

Juris Doctor, Graduated with Distinction

Dec. 1996

University of California, Davis

Bachelor of Arts, Philosophy

SELECTED PUBLICATIONS AND TEACHING EXPERIENCE

Editorial Board Member, Climate Change Reporter (August 2009-January 2011)

- Editorial Board Member, California Land Use Law and Policy Reporter (November 2008-August 2009)
- Lecturer, Lorman Seminars, Real Estate Development from Beginning to End, Local Government Approvals, Oakland, CA (February 2008)
- Co-Author, Low Impact Development: A Growing Trend in Stormwater Management, Builder Magazine (March
- Panelist, San Joaquin County Housing Symposium, Fresno, CA (February 2007)
- Adjunct Professor, McGeorge School of Law, Appellate Advocacy Program (2006)
- Presenter, Northern California Water Association and Downey Brand, "Ethics Training for Local Agency Officials, AB1234: The Brown Act" (2006)
- Presenter, "Groundwater Law and Hydrology," UC Davis Extension Program (October 2004)

COMMUNITY INVOLVEMENT

- Executive Board Member, Professional Women in Building, Building Industry Association of the Bay Area $(2009-2012)^{-1}$
- Member/Supporter, Golden Gate National Parks Conservancy (2009-present)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

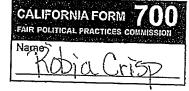
STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Received

Please type or print in ink. NAME OF FILER (LAST) Robia 1. Office, Agency, or Court Agency Name ▶ If filing for multiple positions, list below or on an attachment. Agency: Position: 2. Jurisdiction of Office (Check at least one box) ☐ State ☐ Judge or Court Commissioner (Statewide Jurisdiction) ☐ Multi-County County of _ Other _ 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2011, through ☐ Leaving Office: Date Left ___ December 31, 2011. (Check one) -or-The period covered is _ O The period covered is January 1, 2011, through the date of December 31, 2011. leaving office. Assuming Office: Dale assumed ____ O The period covered is . the date of leaving office. Candidate: Election Year Office sought, if different than Part 1: -4. Schedule Summary Check applicable schedules or "None." ► Total number of pages including this cover page: Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-2 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule B - Real Property - schedule allached Schedule E - Income - Gifts - Travel Payments - schedule attached ■ None - No reportable interests on any schedule 5. Verification STREET STATE (415) I have used recovery preparing units statement. I have reviewed this statement and to the pest of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Date Signed Signature (month, day, year)

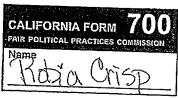
SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%) Do not attach brokerage or financial stalements.



NAME OF BUSINESS ENTITY	NAME OF DISPUSO SAME
VELOCITY FIVEWARD GYOUP (FMM A-2) GENERAL DESCRIPTION OF BUSINESS ACTIVITY	NAME OF BUSINESS ENTITY UNITED PAYOU SOVICE
venture debt portfolio	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE	delivery sorvice
\$2,000 - \$10,000	FAIR MARKET VALUE () \$2,000 - \$10,000 \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock □ Other	NATURE OF INVESTMENT Stock Other
(Describe) Partnership O income Received of \$0 - \$499	(Oascdon)
O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	ACQUIRED DISPOSED
Cymax (Fam A-2)	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
e-commorce co.	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000 \$\int \\$100,001 - \\$1,000,000 \$\int \\$000,000	S2,000 - \$10,000 S10,001 - \$100,000
NATURE OF INVESTMENT	\$100,001 - \$1,000,000 Over \$1,000,000
Stock Other	NATURE OF INVESTMENT Stock Other
(Describe) Partnership O income Received of \$0 - \$499	(Describa) Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE;	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
PILET WATES	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Software co.	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000 \$100,000 \$100,000	\$2,000 - \$10,000
	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT A Stock Other (Describe)	NATURE OF INVESTMENT Stock Other
Partnership O Income Received of \$0 - \$499	(Describe) Partnership O income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	
Commenter	

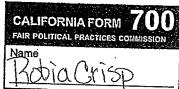
SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)



► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
Canopy Capital	Podiness Entity or IRUST
Name 301 California Dr. Suite#3,	Name ·
Check one Buyliness Address Acceptable) Buylinesme, CA	Address (Business Address Acceptable)
Trust, go to 2 Business Entity, complete the box, then go to 2	Check one Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY DO VOICE MINESTMENT FORM	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000	\$2,000 - \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	\$10,001 - \$100,000 ACQUIRED DISPOSED \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Sole Proprietorship Partnership	NATURE OF INVESTMENT Sole Proprietorship Partnership
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITYTRUST) 	
\$0 - \$499	SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) \$0 \cdot \$499
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF	► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE
VOLUCATY FINANCIAL STYDOOD, CHIMAY	INCOME OF \$10,000 OR MORE (Altach a apparate sheet if necessary)
Heetmatics ,	
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE
Check one box:	BUSINESS ENTITY OR TRUST Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, If Investment, or Assessor's Parcel Number or Street Address of Real Property
	The state of Oliver Audiess of Real Property
Description of Business Activity or	December of Davis and the
City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$10,001 - \$100,000	\$10,001 - \$100,000//11
Over \$1,000,000	\$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Parlnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Yrs. remaining Other	Leasehold Ciber
Check box if additional schedules reporting investments or real property are attached	Yrs. remaining Check box if additional schedules reporting investments or real property are attached
Comments:	·

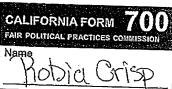
FPPC Form 700 (2011/2012) Sch. A-2 FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE B Interests in Real Property (Including Rental Income)



ASSESSOD'S PARCEL NUMBER OR STREET ADDRESS ► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS CITY FAIR MARKET VALUE IF APPLICABLE, LIST DATE: FAIR MARKET VALUE \$2,000 - \$10,000 IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 / 11 \$10,001 - \$100,000 \$100,001 - \$1,000,000 ACQUIRED DISPOSED \$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000 Over \$1,000,000 NATURE OF INTEREST NATURE OF INTEREST Ownership/Deed of Trust Easement Ownership/Deed of Trust ☐ Easement IF RENTAL PROPERTY, GROSS INCOME RECEIVED IF RENTAL PROPERTY, GROSS INCOME RECEIVED \$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000 \$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000 10,001 - \$100,000 OVER \$100,000 SOURCES OF RENTAL INCOME: If you own a 10% or greater SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of interest, list the name of each tenant that is a single source of Income of \$10,000 or more. income of \$10,000 or more. You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows: NAME OF LENDER* NAME OF LENDER* ADDRESS (Business Address Acceptable) ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) INTEREST RATE TERM (Months/Years) ☐ None ☐ Noue HIGHEST BALANCE DURING REPORTING PERIOD HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000 \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,00B OVER \$100,000 **\$10,001 - \$100,000** OVER \$100,000 Guarantor, if applicable Guarantor, if applicable Comments:

SCHEDULE C . Income, Loans, & Business Positions (Other than Gifts and Travel Payments)



► 1: INCOME RECEIVED	
Update Legal, INC.	► 1, INCOME RECEIVED NAME OF SOURCE OF INCOME
ADDRESS (Business Addrest Acceptable) 100 California Street, SF BUSINESS ACTIVITY, IF ANY, OF SOURCE	ADDRESS (Business Address Acceptable)
YOUR BUSINESS POSITION	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Contract attorney	YOUR BUSINESS POSITION
GROSS INCOME RECEIVED \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000	GROSS INCOME RECEIVED \$500 - \$1,000 \$1,001 - \$10,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	S10,001 - \$100,000 OVER \$100,000 CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Selary Spouse's or registered domestic partner's Income Loan repayment Partnership	Salary Spouse's or registered domestic partner's income Loan repayment Partnership
Sale of(Real property, cer, boet, etc.)	Sale of(Real property, car, boat, etc.)
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
Other(Describs)	Other(Oescribe)
* You are not required to report loans from commercial lend retail installment or credit card transaction, made in the lemembers of the public without regard to your official staturegular course of business must be disclosed as follows:	ding institutions, or any indebtedness created as part of a
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)	% None
BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LOAN Personal residence
HIGHEST BALANCE DURING REPORTING PERIOD	Real PropertyStreet address
\$500 - \$1,000	
S1,001 - \$10,000	City
S10,001 - \$100,000	Guarantor
OVER \$100,000	Other
·	(Describe)
Comments:	

AING BEANG FOR THE BANK SELECTION OF THE SELECTION OF THE

AFTORNIEY SEARCH

Robia Sook Crisp - #227198

Current Status: Active

This member is active and may practice law in California.

See below for more details.

Profile Information

The following information is from the official records of The State Bar of California.

Bar

227198

Number:

Address: Manatt Phelps Phillips

One Embarcadero

Center

30th Floor

San Francisco, CA

94111

Map it

e-mail:

@manatt.com

(415)

(415) 291-7474

County:

San Francisco

Undergraduate

Phone Number:

Fax Number:

School:

Univ of California Davis; Davis CA

District:

District 1

Sections:

None

Law School:

McGeorge SOL Univ of the Pacific;

CA

Status History

Effective Date

Status Change

Present

Active

12/3/2003

Admitted to The State Bar of California

Explanation of member status

Actions Affecting Eligibility to Practice Law

Disciplinary and Related Actions

Overview of the attorney discipline system.

This member has no public record of discipline.

Administrative Actions

This member has no public record of administrative actions.

Start New Search >

http://members.calbar.ca.gov/fal/Member/Detail/227198

RECEIVED
AUG 1 6 2013

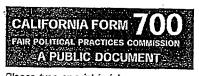
Revised July 2013

Assessment Appeals Board City and County of San Francisco (415) 554-6778 Fax (415) 554-6775



City Hall, Room 405 1 Dr. Carlton B. Goodlett Place San Francisco, CA 94102-4697

Complete and return this original Application to the Assessment Appeals Board
Application for Appointment to: (Please circle one) Board 1 Board 1 or Board 1 Alternate Board 2 Alternate Board 3 or Board 3 Alternate
Enter your name, mailing address and daytime telephone number in the spaces provided. Because this form is a document available other personal contact information.
Do you authorize release of your private/personal information? yes no
Name: Home Address:
City: State: Zip.code:
City: State: Zip code: Business Address: \[\(\text{LETTERMANDR.} \(\text{C300} \) City: \[\text{SANTKANCISCO} State: \(\text{GA} \) Zip Code: \[\text{Y129} \] Home Phone:
Mork Phone: The Land Control of the
Pager #: 415 E-Mail Address: @ Pacunion com
Are you a United States citizen, or a resident alien who is eligible for and has applied for citizenship? Yes \(\subseteq \) No
would be a felony? Yes No
(If yes, please attach a statement describing the offense(s) for which you have been convicted, the date of the conviction(s), and the court(s) that convicted you.)
Pursuant to Ordinance No. 393-98 the following qualifications are required:
A person shall not be eligible for nomination for membership on an assessment appeals board unless he or she has a minimum of five years' professional experience in this state as one of the following: (1) certified public accountant or public accountant; (2) licensed real estate broker; (3) attorney; or (4) property appraiser accredited by a nationally recognized professional organization, or property appraiser certified by either the Office of Real Estate Appraiser or by the State Board of Equalization. Documentation of qualifying experience must be submitted with this application form. This requirement does not apply to incumbent board members nominated for appointment to their
Please state your qualifications: LICENSED REAL ESTATE BROKER SINCE 1988
Please state your business and/or professional experience: SACES OF REAL PROPERTY SINCE 1987. Occupation: P. F. F. P.
Occupation: LOR GIME BROKER Education: MRA FRAME WAY DE TILL FROM I
Civic Activities: REAL ESTATE NEWSPAPER COLUMNIST FOR PICHMOND REVIEW UC. BECKELEY AND SUNSET BEACON PAST PORTUGATE AND BOXOGO UC.
Ethnicity (optional): AND SUNSEY BEACON, PAST PRESIDENT AND BOARD MEMBER OF Sex (optional): Other Personal Information (optional)
Other Personal Information (optional) VARIOUS SREANIZATIONS
Would you be able to attend Day Meetings? Yes No Evening meetings? Yes No How many days a week would you be available for hearings? Have you attended an Assessment Appeals Board meeting? Yes No
Appearance before the RULES COMMITTEE is a requirement before any appointment can be made. Please Note: Your application will be retained for one year.
Date: 8 5 7613 Applicant's Signature:
For Office Use Only: Appointed to Board #: Seat #: Term Expires:



STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Received Order Use Only

Please type or print in ink.

NAME OF FILER	(LAST)	(FIRS	T)	(MIDDLE)
Lee		John		М.
1. Office, Agency, o	r Court			
Agency Name				
Assessment Appe	eals Board			
Division, Board, Departs	nent, District, if applicable	Your	Position	
• .		Cor	nmissioner	
▶ If filing for multiple p	ositions, list below or on an attachment.			
Agency:		Posi	tion:	
2. Jurisdiction of C	ffice (Check at least one box)			
State	•		ge or Court Commissioner (Protovido huistii-1
	•		nty of San Francisco	Statewide Jonsdiction)
San Fran	cisco	[X] COI	•	
Oity of	cisco	LI Oth	er	
3. Type of Stateme	nt (Check at least one box)			
Annual: The perio	d covered is January 1, 2012, through 31, 2012.		aving Office: Date Left neck one)	
-or- The perio Decembe	d covered is// 31, 2012.	_, through O	The period covered is Janu leaving office.	eary 1, 2012, through the date of
Assuming Office:	Date assumed 09 , 01 , 2013		The period covered is the date of leaving office.	
Candidate: Election	n year and office	ce sought, if different than	Part 1:	
4. Schedule Summa	ary			
Check applicable sche	dules or "None."	► Total number o	f pages including this	s cover page: 9
Schedule A-1 - Inv	estments – schedule atlached			iness Positions – schedule attach
	estments - schedule attached		D - Income - Gifts - scheo	
Schedule B - Real	Property – schedule attached			el Payments – schedule altached
	-0			•
	☐ None - No repo	ortable interests on any so	hedule	
5. Verification				
MAILING ADDRESS (Business or Anegory Address)	STREET Recommended - Public Document)	cmy	STATE	ZIP CODE
1 Letterman Drive		in Francisco	CÁ	94129
DAYTIME TELEPHONE NUME		E-MAIL ADDRES		34123
(415) 447-623		,	pacunion.com	
I have used all reasonab herein and in any attach	le diligence in preparing this statement, ed schedules is true and complete. I a	I have reviewed this state cknowledge this is a publi	ment and to the best of my local	knowledge the information contain
l certify under penalty	of perjury under the laws of the State	of California that the fo	pregoing is true and corre	ct.
Date Signed <u>09/15/2</u> 6	013	Signature	HUMA	In
**************************************	(month, day, year)	_	/ File the originally signed state	ement with your filing official)

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM	/ayay	
FAIR POLITICAL PRACTICES COM	MISSION	į
Name		î
John M. Lee		

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Time Warner Cable	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	Bank of America GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Cable	Banking
FAIR MARKET VALUE	
	FAIR MARKET VALUE
	☑ \$2,000 · \$10,000 ☐ \$10,001 · \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT
(Describe)	✓ Stock Other (Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	1 1 1 2 2
ACQUIRED DISPOSED	
➤ NAME OF BUSINESS ENTITY	5.51 3525
Intel Corporation	MAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	IBM
	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Computers	Computers
FAIR MARKET VALUE	
S2,000 - \$10,000 Ø \$10,001 - \$100,000	FAIR MARKET VALUE
S100,001 - \$1,000,000 Over \$1,000,000	S2,000 - \$10,000
1	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT ✓ Stock Other	NATURE OF INVESTMENT
(Describe)	☑ Stock ☐ Other
Partnership O Income Received of SO - \$499	(Describe)
O Income Received of \$500 or More (Report on Schedule C)	Partnership O income Received of So - \$499 O income Received of \$500 or More (Report on Schedule C)
	(Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
// 12// 12 ACQUIRED DISPOSED	
DISFOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Merck	Microsoft
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	
Pharmaceutical	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
	Computer
FAIR MARKET VALUE	FAIR MARKET VALUE
52,000 - \$10,000	☐ \$2,000 - \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Qver \$1,000,000
NATURE OF INVESTMENT	
Stock Other	NATURE OF INVESTMENT
(Describe)	✓ Stock Other
Partnership O Income Received of SO - \$499	(Describe) Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	<u> </u>
	ACQUIRED DISPOSED
Comments	

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FOR	M 7/00 S COMMESION
Name	
John M. Lee	•

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Oracle Corporation	Qualcomm
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Software	Computer
FAIR MARKET VALUE	FAIR MARKET VALUE
☐ \$2,000 - \$10,000	☐ \$2,000 - \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE. LIST DATE:	IF APPLICABLE, LIST DATE:
	/ / 12
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
LSI Corporation	Times Warner
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	
Computers	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
	Entertainment
FAIR MARKET VALUE	FAIR MARKET VALUE
S2,000 - \$10,000	☑ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe) Partnership O Income Received of \$0 - \$499	(Describe)
O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
	O medine Received of Saud as Mibre (Repair on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	
	NOGOTICE DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	CENERAL DEPOSITION OF SUB-
	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE	FAIR MARKET VALUE
S2,000 - \$10,000 S10,001 - \$100,000	☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499
C A CONTROL OF CONTROL	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
Times Manual Otalia	•
Comments: Times Warner Stock was acquired 9/13/2000.	

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)

CALI	FORNI	AFO	RM.	7/0	(0)
Name	LITICAL	PRACTI	CES CO	MMISSI	ON S
John	M. Lea	ž			

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
John M Lee and Lily T Lee Revocable Trust	John M Lee and Lily T Lee Revocable Trust
Name	Name
1 Letterman Drive, #C500, San Francisco, CA 94129 Address (Business Address Acceptable)	1 Letterman Drive, #C500, San Francisco, CA 94129
Check one	Address (Business Address Acceptable)
☑ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2	Check one VI Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
NATURE OF INVESTMENT Partnership Sole Proprietorship Other	NATURE OF INVESTMENT Partnership Sole Proprietorship Oiner
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
► 2. DENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	> 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PROTRATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
☐ \$0 - \$499	S0 - \$499
S. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF SIC OU OR MORE (Aducts 3 episor shed trice) surply. Notice	SIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF STOUDG OR MORE MILE IN COMMON SHOULD SEE THE STOUDG OF MORE MILE IN COMMON SHOULD SEE THE SECOND SEE THE SECOND SEE THE SECOND SEE THE SECOND
4: INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:	■ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST. Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT
3609-045	1649-012
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
Rental Real Estate	Rental Real Estate
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity or
CAID AMBURE	City or Other Precise Location of Real Property
S2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$10,001 - \$100,000	\$10,001 - \$100,000// 12
\$\ \\$100,001 - \\$1,000,000 ACQUIRED DISPOSED Over \\$1,000,000	
NATURE OF INTEREST	Over \$1,000,000
Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2012/2013) Sch. A-2

SCHEDULE A-2

Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM	IAYAY
FAIR POLITICAL PRACTICES COMM	
Name	
Name	
John M. Lee	

►1. BUSINESS ENTITY OR TRUST	▶ 1: BUSINESS ENTITY OR TRUST
John M Lee and Lily T Lee Revocable Trust	John M Lee and Lily T Lee Revocable Trust
Name	Name
1 Letterman Drive, #C500, San Francisco, CA 94129 Address (Business Address Acceptable)	1 Letterman Drive, #C500, San Francisco, CA 94129
Check one	Address (Business Address Acceptable)
☑ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2	Check one Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE. LIST DATE: S0 - \$1,999 \$2,000 - \$10,000 \$100,001 - \$100,000 ACQUIRED DISPOSED Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
NATURE OF INVESTMENT Partnership Sole Proprietorship Other Other	NATURE OF INVESTMENT Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
2 IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	> 2 IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME 10. THE ENTITY/TRUST)
S0 - \$499	S0 - \$499
S. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF STD,000 OR MORE (Albeit) separate that I hoosessy) None	➤ 9 LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Affect is special stress (I reversity)). ✓ None
Alyson Belcher, Mary Jane Eisenberg, Sarah Haselup, Sarah Davis, Esmeralda Munoz	
♥ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:	► 4 INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:
☐ INVESTMENT ☐ REAL PROPERTY 1526-021	☐ INVESTMENT ☐ REAL PROPERTY 6167-027
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	· · · · · · · · · · · · · · · · · · ·
Rental Real Estate	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property Rental Real Estate
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 1/12 1/12 1/12 1/12 1/12 1/10,001 1/10,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Yrs. remaining Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box If additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2012/2013) Sch. A-2 FPPC Advice Email: advice@[ppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

_G	ALIF	OR	NIA	FO	RM	7		
IAI Na	r Po me	līje	AL PR	ACTI	CES	OM	issi	
Jo	hn	M. L	ee.					

▶1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
John M Lee and Lily T Lee Revocable Trust	
Name	Name
1 Letterman Drive, #C500, San Francisco, CA 94129	
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one Trust, go to 2 Business Entity, complete the box, then go to 2	Check one
	Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE-
\$0 - \$1,999 \$2,000 - \$10,000 / / 12	\$0 - \$1,999
\$2,000 - \$10,000/12	\$2,000 - \$10,000
\$100,001 - \$1,000,000	\$10,001 - \$100,000 ACQUIRED DISPOSED S100,001 - \$1,000,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INVESTMENT	
Partnership Sole Proprietorship	NATURE OF INVESTMENT Partnership Sole Proprietorship
Other	Other Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
2 IDENTIFY: THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA	
SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	► 2 DENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO BATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
S0 - \$499 S10,001 - \$100,000	· · · · · · · · · · · · · · · · · · ·
☐ \$500 - \$1,000	\$0,001 - \$100,000 \$500 - \$1,000
☐ \$1,001 - \$10,000	S1,001 - \$10,000
LIST/THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (direct a separate sine) if recessing	SELIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF
None	33 LIST: THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Albeit a separate sheet if recessary)
	None
Allce Sun, Alvin Chen, Tobi Stuart, John DeFazio, Brett Pameles, Peter Lowell, Matthew Schlachtman	
- Children Comer, Matthew Schlachthall	
SA MANUESTALING ALL HELLOWS IN THE SAME AND ADDRESS OF	
4 NVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	▶ 4 INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT ☑ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
0218-11	
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
Rental Real Estate	Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or	Describing (D.)
City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
<u></u> \$2,000 - \$10,000	\$2,000 - \$10,000
\$10,001 · \$100,000	\$10,001 - \$100,000/12
☑ Over \$3,000,000	\$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Property Ownership/Deed of Trust Stock Partnership	Property Ownership/Deed of Trust Stock Partnership
T Leasehold Colber	
Leasehold Other	Leasehold Yrs. remaining Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property
ore disaction	are attached
Commence	FDDC Form 700 (2012)2012) Cal. A 2
Comments:	FPPC Form 700 (2012/2013) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov
	FPPC Toil-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE B Interests in Real Property (Including Rental Income)

	CALIFORNIA FORM 70	0	Sec.
	FAIR POLITICAL PRACTICES COMMISSIO		
	Name		
1	John M. Lee		

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
1412-019	2041-012
CITY	CITY
San Francisco	San Francisco
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 12	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
NATURE OF INTEREST	NATURE OF INTEREST
☑ Ownership/Deed of Trust ☐ Easement	✓ Ownership/Deed of Trust ☐ Easement
Leasehold Other	Leasehold
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	
S10,001 - \$100,000 OVER \$100,000	\$0 - \$499 \$5500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 \$000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more. None	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more. None
You are not required to report loans from commercial le business on terms available to members of the public w loans received not in a lender's regular course of business.	ending institutions made in the lender's regular course of without regard to your official status. Personal loans and ess must be disclosed as follows:
NAME OF LENDER*	NAME OF LENDER*
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
%	%
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
\$500 - \$1,000	S500 - \$1,000 S1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
Guarantor, if applicable	Guarantor, if applicable
Guarantor, if applicable	Guarantor, if applicable

SCHEDULE C Income, Loans, & Business Positions (Other than Gifts and Travel Payments)

CALIFORNIA FORM 70	(0)
FAIR POLITICAL PRACTICES COMMISSIO Name	
John M. Lee	

MINIOME RECEIVED	► 1. INCOME RECEIVED
MAINE OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
Pacific Union International	Dignity Health
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
1 Letterman Dr, #C500, San Francisco, CA 94129	900 Hyde St, San Francisco, CA 94109
BUSINESS ACTIVITY, IF ANY, OF SOURCE Real Estate	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION	Hospital
Broker Position	YOUR BUSINESS POSITION
	Pharmacist
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000 ☐ \$10,000 ☐ \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
∑ \$10,001 - \$100,000	S10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income	Salary Spouse's or registered domestic partner's income
Loan repayment Partnership	Loan repayment Partnership
Sale of	
(Real property, car, boat, etc.)	Sale of(Real property, car, boat, etc.)
☐ Commission or ☐ Rental Income, list each source of \$10,000 or more	Commission or Rental Income. list each source of \$10,000 or more
	and the second source of 510 obt. of more
Other(Describe)	Other
	(Describe)
> 2 LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIO	
You are not required to report loans from commercial loans	odina in attuat
retail installment or credit card transaction, made in the le	ender's regular course of business on terms available to
regular course of business must be disclosed as follows:	in a tender s
NAME OF LENDER*	INTEREST RATE TERM (Months Vocas)
	TERM (Months/Years)
ADDRESS (Business Address Acceptable)	% None
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	☐ None ☐ Personal residence
HIGHEST BALANCE DURING REPORTING PERIOD	Real PropertyStreet address
\$500 - \$1,000	
\$1,001 - \$10,000	City
\$10,001 - \$100,000	Guarantor
OVER \$100,000	
3	Other
	(Describe)
Commente	
Comments:	

SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
John M. Lee

- You must mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the \$440 gift limit, but may result in a disqualifying conflict of interest.

► NAME OF SOURCE (Not an Acronym)	
San Francisco Association of REALTORS (SFAR)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	
301 Grove Street	ADDRESS (Business Address Acceptable)
CITY AND STATE	
San Francisco, CA 94102	CITY AND STATE
RIISINESS ACTIVITY I	
Real Estate Association 501 (c)(3)	BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
DATE(S): 09 / 01 / 12 08 / 31 / 13 AMT: \$5,233.03 (If gift) TYPE OF PAYMENT: (must check one) Gift Income Made a Speech/Participated in a Panel Other - Provide Description Reimbursement for travel expenses to various conferences on behalf of SFAR NAME OF SOURCE (Not an Acronym) ADDRESS (Business Address Acceptable) CITY AND STATE BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)	DATE(S):
DATE(S):/ AMT: \$	DATE(S):/ AMT: \$
TYPE OF PAYMENT: (must check one) Gift Income	1
	TYPE OF PAYMENT: (must check one) Gift Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
	Two rooms Description
Comments:	

STATE OF CALIFORNIA BUREAU OF REAL ESTATE

The license information shown below represents public information taken from the Bureau of Real Estate's database at the time of your inquiry, It will not reflect pending changes which are being reviewed for subsequent database updating. Also, the license information provided includes formal administrative actions that have been taken against licensees pursuant to the Business and Professions Code and/or the Administrative Procedure Act. All of the information displayed is public information. Although the business and mailing addresses of real estate licensees are included, this information is not intended for mass mailing purposes.

License information taken from records of the Bureau of Real Estate on 8/14/2013 9:46:55 AM

License Type:

BROKER

Name:

Lee, John M

Mailing Address:

__ LAPLAYA STE 537

SAN FRANCISCO, CA 94121

License ID:

00965312

Expiration Date:

09/28/16

License Status:

LICENSED

Salesperson License Issued:

07/20/87 (Unofficial -- taken from secondary records)

Broker License Issued:

09/29/88 (Unofficial -- taken from secondary records)

Former Name(s):

NO FORMER NAMES

Main Office:

1 LETTERMAN DRIVE BUILDING C SUITE 300 SAN FRANCISCO, CA 94129

DBA

NO CURRENT DBAS

Branches:

NO CURRENT BRANCHES

Affiliated Licensed Corporation(s): NO CURRENT AFFILIATED CORPORATIONS

Salespersons:

<u>01008573</u> - Lee, Lily Tam

Comment:

NO DISCIPLINARY ACTION

NO OTHER PUBLIC COMMENTS

>>>> Public information request complete <<<<

Assessment Appeals Board City and County of San Francisco (415) 554-6778 Fax (415) 554-6775



City Hall, Room 405 1 Dr. Carlton B. Goodlett Place San Francisco, CA 94102-4697

	Complete and return this original	Application to the Asses	Sment Anneals Roard
	lication for Appointment to: (Please circle one)	Board 1 or Board 2 or Board 3 or	Board 1 Alternate Board 2 Alternate Board 3 Alternate
Enter your name, for public review, other personal co	malling address and daytime telephone in you may list your business/office address intact information.	number in the spaces provided s, telephone number and e-mai	. Because this form is a document available address in lieu of your home address or
Do you authoriz	e release of your private/personal Inf	ormation? \(\sqrt{y} \) yes \(\sqrt{AD} \) \	Bringstatusts 4
City: Jan	Way cisio	State: CA	7in code: 941/7
Business Addre	ss: 601 Buena Vistau) city:SE	State: CA Zip Code: 94/17
Home Phone:	Work-Phor	ne: <u>415-706-099</u> 5) Fax #:
Pager#:	E-Mail Add	lress:_ — www.	effers.com
Are you a United	l States citizen, or a resident alien wl	no is eligible for and has app	blied for citizenship? Nes No
Have you ever the would be a felor (If yes.)	een convicted of a felony in this state y? Yes No lease attach a statement describing	or convicted of any offens	e which, if committed in this state,
110 440	e of the conviction(s), and the court(s' dinance No. 393-98 the following q	I mat convicted you.)	•
accountant or pu nationally recogn Appraiser or by	n shall not be eligible for nomination to turn of five years' professional experient tablic accountant; (2) licensed real est nized professional organization, or profine State Board of Equalization. Docu This requirement does not apply to	ate broker, (3) attorney; or (Operty appraiser certified by	he following: (1) certified public 4) property appraiser accredited by a either the Office of Real Estate
Please state you	r qualifications: <u>Certified</u>	Real Estate	Appraiser
Please state you	r business and/or professional experi	ence: Real Esta:	le Appraiser,
Occupation: A	praiser, Keal Estate Ag	ent Education: BA ()CLA . (
Civic Activities: _	Randall Museum, 5	SPEAK, CSB-	school
Ethnicity (options	••	Sex (optional): IM	ŊF
Other Personal I	nformation (optional)		
How many days Have you attend	le to attend Day Meetings? Yes a week would you be available for he ed an Assessment Appeals Board ma	arings? 4 How ma	meetings? ☐ Yes ☐ No ny evenings a week?
Appearant		is a requirement before a lication will be retained for c	ny appointment can be made, one year.
For Office Use (Applicant's S Only: Appointed to Board #:	ignature: 4 Seat#:	Term Explres:
			Revised July 2013

Kristy Nelson

______mleffers.com (415) ___

Skills

Professional Experience

Independent Appraiser and Real Estate Sales Agent

1995- Present

- Appraise apartments, commercial properties, condominiums, income properties and single family residences
- Represent buyers and sellers in real estate transactions
- Lease and manage residential and commercial properties

Senior Staff Real Estate Appraiser, San Francisco Federal, San Francisco, CA 1993-1995

- Appraised apartments, condominiums and income properties
- Planned unit developments and single family residences
- Reviewed apartment and residential appraisals
- Supervised staff reviewers

Regional Chief Appraiser, Foster Ousley Comley, Walnut Creek, CA 1992-1993

- Managed staff reviewers
- Determined final review value for residential properties, condominiums, income properties and planned unit developments
- Provided technical support and training

Independent Appraiser, Johnson O'Neil & Associates; Michael J. VIzzini Associates, Los Angeles, CA 1990-1992

- Prepared narratives for commercial properties and vacant land appraisals
- · Appraised apartments, condominiums and residential properties
- Prepared relocation and proposed construction appraisals

Senior Staff Real Estate Appraiser, Home Savings America, Palos Verdes, CA 1986-1991

- Appraised condominiums, planned unit developments and single family residences
- Appraisals ranged in price from \$90,000 to \$4,000,000
- Appraised multi-unit income producing properties
- Reviewed single residences and income property appraisals
- Assisted in office management

Leasing Consultant, Dorn and Company, Los Angeles, CA 1984-1986

- Located office and real estate space for commercial tenants
- Aided prospective tenants in space planning and building design
- Negotiated commercial leases
- Published San Fernando Valley Commercial Leasing Activity in WESTERN REAL ESTATE NEWS, December 20, 1986

Licenses

Certified General Appraisal License #AGOO7334 California Real Estate Sales License #00884857

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Received Official Use Only

Please type or print in ink.

NAI	IE OF FILER	(LAST)		(FIRST)		Cran o
Ne	elson		Kristine	••		(MIDDLE)
1.	Office, Agend	cy, or Court			The state of the s	
	Agency Name					
	Assessment :	appeals Board				
	Division, Board, D	epartment, District, if applicable		Your Position		
				Board 3		
	► If filing for mult	iple positions, list below or on an attack	nment.	····		
	Agency:			Position:		
2.	Jurisdiction	of Office (Check at least one box)			·	
	State	,		UJudge or C	ourt Commissioner (Statewide Jurisdiction)
	☐ Multi-County _					Salomoe vansaionorij
	City of San	Francisco				
3,		ement (Check at least one box)	•	•		
	Dec	period covered is January 1, 2012, throember 31, 2012,	•	Leaving O (Check one	ffice: Date Left	
	-or- The Dec	period covered is	013 through		riod covered is Janua	ary 1, 2012, through the date of
	Assuming Of	fice: Date assumed		O The per	riod covered is	_/, through
J	the date of leaving office. Candidate: Election year and office sought, if different than Part 1:					
	Schedule Su					
	спеск аррисавіе	schedules or "None."	► Total	number of page	s including this	cover page:
		 Investments – schedule attached 	}	Schedule C - Inc	ome, Loans, & Busil	ness Positions - schedule attached
		 Investments – schedule attached 		Schedule D - Inc	ome – Gifts – sched	ule attached
	☑ Schedule B -	Real Property - schedule attached	[Payments - schedule attached
			-or-			
		∐ None - N	o reportable intere	sts on any schedule		
	Verification					
	MAILING ADDRÉSS (Business or Agency Ac	STREET (dress Recommended - Public Document)	CITY		STATE	ZIP CODE
		B Goodlett pl #405	San Francis	SCO	Ca	94102
	DAYTIME TELEPHONE	NUMBER		E-MAIL ADDRESS (OPTIC		0.102
	(415)					
	have used a resource on preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained perein and in any attached schedules is true and complete. I acknowledge this is a public document.					
	certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.					
		9/10/1000		- 1		
١	Date Signed	(month, day, year)	Si	gnature		
		unani, vay, year)		\ (F	te the originally signed states	the same the same a sale is a substitute of a sale in the same of the same of the sale is a sale in the sale in
				O_{FP}	FPPC PC Toll-Free Helplir	FPPC Form 700 (2012/2013) Advice Email: advice@fppc,ca.gov ne: 866/275-3772 www.fppc.ca.gov

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name	i Ç
Kristine Nelson	

► NAME OF BUSINESS ENTITY	A MANE OF CHICAGO
PGE	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	Cisco GENERAL DESCRIPTION OF BUSINESS ACTIVITY
electricity	Computers
FAIR MARKET VALÚE	
	FAIR MARKET VALUE
\$100,001 - \$1,000,000 Over \$1,000,000	\$2,000 - \$10,000
NATURE OF INVESTMENT ✓ Stock Other	NATURE OF INVESTMENT
(Describa)	✓ Stock Other
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Intel	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	Southern Copper GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Chip maker	Copper
FAIR MARKET VALUE	FAIR MARKET VALUE
	[7] A
S100,001 - \$1,000,000 Over \$1,000,000	
NATURE OF INVESTMENT	S100,001 - \$1,000,000 Over \$1,000,000
Stock Other	NATURE OF INVESTMENT
(Describe)	✓ Stock Other
Partnership O Income Received of \$0 - \$499	(Describe) Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
	C streams to 3500 of Mote (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	THE LIGHTLY EIGHT DAIL.
ACQUIRED DISPOSED	
	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Hewlett Packard	TABLE OF BOSINESS EIGHTY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	
Computers	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE	FAIR MARKET VALUE
✓ \$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	
Stock Other	NATURE OF INVESTMENT
(Describe)	Stock Other (Describe)
Partnership O income Received of \$0 - \$499	Partnership O income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
// 12 / / 12	
ACQUIRED DISPOSED	
	ACQUIRED DISPOSED
Comments:	•

SCHEDULE A-2

Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSI Kristine Nelson

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
Leffers Family Trust	OK. NOST
Name	Name
Address (Business Address Acceptable) Check one Trust, go to 2 Business Entity, complete the box, then go to 2	Address (Business Address Acceptable) Check one Trust, go to 2 Business Entity complete the box then see to 0
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2 GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED DISPOSED \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT Partnership Sole Proprietorship	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 / 12 / 12 \$10,001 - \$100,000 ACQUIRED DISPOSED \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT Partnership Sole Proprietorship
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) \$0 - \$499	
3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Altach a separate sheet if necessary) None	3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary) None
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box: INVESTMENT INVESTMENT	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property 287 Sanchez Street Description of Business Activity or City or Other Precise Location of Real Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property 565-567 Natoma street Description of Business Activity or City or Other Professional Activity or City or Oth
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 12	City of Other Precise Location of Real Property FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$1,000,000 ACQUIRED Over \$1,000,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2012/2013) Sch. A-2

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Kristine Nelson

➤ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	L ACCECCADE DADOT ATTACAME
62-64 Moss Street	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS 621 Natoma Street
CITY	-
San Francisco	CITY
Carrianoisco	San Francisco
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 112 12	FAIR MARKET VALUE \$2,000 - \$10,000
NATURE OF INTEREST	
✓ Ownership/Deed of Trust ☐ Easement	NATURE OF INTEREST
	☑ Ownership/Deed of Trust ☐ Easement
Leasehold	Leasehold
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
S0 - \$499 S500 - \$1,000 S1,001 - \$10,000	1 -
☑ \$10,001 - \$100,000 ☐ OVER \$100,000	
	S10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more. None	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more. None
* You are not required to report loans from commercial le	nding institutions made in the lender's regular course of
a a surviva ou round available to the three of the phillips w	AIDOUT FORGER to voue official status mans at a
loans received not in a lender's regular course of busing	ess must be disclosed as follows:
NAME OF LENDER*	
White Of ECHOER	NAME OF LENDER*
	·
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
1	SOURCES ROTATI, IF MAY, OF LENDER
INTEREST RATE TERM (Manths/Nears)	
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
% None	% None
HIGHEST BALANCE DURING REPORTING PERIOD	
\$500 - \$1,000 \$1,000	HIGHEST BALANCE DURING REPORTING PERIOD
	\$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
Guarantor, if applicable	Guarantor, if applicable
Comments:	•

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700	
FAIR POLITICAL PRACTICES COMMISSION	
Name	
Kristine Nelson	

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	
23-25 Moss Street	ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
CITY	1316-1318 Fulton Street
San Francisco	CITY
Carriancisco	San Francisco
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: ☐ \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000
	S100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
✓ Ownership/Deed of Trust	✓ Ownership/Deed of Trust ☐ Easement
Leasehold	Leasehold
Yrs. remaining Other	Yrs. remaining Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000	S0 - \$499 S500 - \$1,000 S1,001 - \$10,000
	☑ \$10,001 - \$100,000 ☐ OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a girate source of the sour
None	Income of \$10,000 or more.
* You are not required to report leave f	
business on terms available to members of the mobile	nding institutions made in the lender's regular course of
loans received not in a lender's regular course of busing	
Toridor o regular course of busine	ess must be disclosed as follows:
NAME OF LENDER*	NAME OF LENDER*
	·
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
	DOOMESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Manifes Manifes Ma	
TENT (MONUS 16915)	INTEREST RATE TERM (Months/Years)
% None	% None
HIGHEST BALANCE DURING REPORTING PERIOD	
S500 - \$1,000 S1,001 - \$10,000	HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 \$1,001 - \$10,000 \$10,000
Guarantor, if applicable	F7 419901 - \$100'000 F7 OAEK \$100'000
E Sectorici, a applicable	. Guarantor, if applicable
_	
Comments:	

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700
Name
Kristine Nelson

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	ACCEGOODIO PARA
445-449 Tehama Street	ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
CITY	
San Francisco	CITY
Carriancisco	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	EAID MADICET VALUE
<u> </u>	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$10,001 - \$100,000	\$10,001 - \$100,000//12/_/12
✓ Over \$1,000,000	\$100,001 - \$1,000,000 ACQUIRED DISPOSED
	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
✓ Ownership/Deed of Trust ☐ Essement	Downston
Leasehold	Ownership/Deed of Trust Easement
Yrs. remaining Other	Leasehold
	Yrs. remaining Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
S0 - \$499 S500 - \$1,000 S1,001 - \$10,000	S0 - \$499 S500 - \$1,000 S1,001 - \$10,000
☑ \$10,001 - \$100,000 ☐ OVER \$100,000	
i	
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of	SOURCES OF RENTAL INCOME: If you own a 10% or greater
income of \$10,000 or more.	Interest, list the name of each tenant that is a single source of income of \$10,000 or more.
None	None
	. Wone
You are not required to report loans from commercial te	nding institutions made in the lender's regular course of
business on terms available to members of the public w	riting institutions made in the lender's regular course of ithout regard to your official status. Personal loans and
loans received not in a lender's regular course of busing	ess must be disclosed as follows:
NAME OF LENDER*	
AND OF ELIDER	NAME OF LENDER*
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
	(= = = = = = = = = = = = = = = = = = =
BUSINESS ACTIVITY, IF ANY, OF LENDER	
THE PARTY OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
% None	i From (Months Jesus)
	% None
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000
S10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
Charantee 16 and Park	T 1.2/201 - \$100'000 T OAEK \$100'000
Guarantor, if applicable	Guarantor, if applicable
omments:	

SCHEDULE C Income, Loans, & Business Positions (Other than Gifts and Travel Payments)

CALIFORNIA FORM 70 FAIR POLITICAL PRACTICES COMMISSION	0
Name	
Kristine Nelson	

► 1. INCOME RECEIVED	
NAME OF SOURCE OF INCOME	► 1. INCOME RECEIVED
Real Estate Commission	NAME OF SOURCE OF INCOME
ADDRESS (Business Address Acceptable)	
1669 Page Street	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	
Will, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION	
Buyers Agent	YOUR BUSINESS POSITION
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
\$500 - \$1,000 \$1,001 - \$10,000	[r
S10,001 - \$100,000 OVER \$100,000	☐ \$1,001 - \$10,000 ☐ \$10,001 - \$100,000 ☐ OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	
Salary Spouse's or registered domestic partner's income	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Loan repayment Partnership	Salary Spouse's or registered domestic partner's Income
Sale of	Loan repayment Partnership
(Real property, car, boat, etc.)	Sale of
	(Real property, car, boat, etc.)
✓ Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
	o marc
Other	
(Describe)	Other
	(Describe)
> 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIO	
TOU die Hot lentifen to report loans from sommer to	The second secon
retail installment or credit card transaction, made in the lemembers of the public without regard to your official state	ding institutions, or any indebtedness created as part of a
members of the public without regard to your official state	side S regular course of business on terms available to
regular course of business must be disclosed as follows:	to: Tersoriar loans and loans received not in a lender's
NAME OF LENDER*	•
	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)	% None
(
BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LOAN
Section 1, IF ARY, OF LENDER	None Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
\$500 - \$1,000	
\$1,001 - \$10,000	City
S10,001 - \$100,000	Guarantor
OVER \$100,000	
	Other
	(Describe)
0	•
Comments:	

FPPC Form 700 (2012/2013) Sch. C FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov



REAL ESTATE APPRAISER LICENSE OFFICE OF REAL ESTATE APPRAISERS Business, Transportation & Housing Agency

Kristine A. Nelson

has successfully met the requirements for a license as a residential and commercial real estate appraiser in the State of California and is, therefore, entitled to use the title:

"Certified General Real Estate Appraiser"

This license has been issued in accordance with the provisions of the Real Estate Appraisers' Licensing and Certification Law.

OREA APPRAISER IDENTIFICATION NUMBER: AG 00

AG 007334

Effective Date: May 6, 2013
Date Expires: May 5, 2015

Jim Wartin, Director, OREA

3007087

THIS DOCUMENT CONTAINS AT THUE WATERWARK HOLD UP TO THEHT TO SEE CHANKING.

Assessment Appeals Board City and County of San Francisco (415) 554-6778 Fax (415) 554-6775



City Hall, Room 405 1 Dr. Carlton B. Goodlett Place San Francisco, CA 94102-4697

Complete and return this original Application to the Assessment Appeals Board
Application for Appointment to: (Please circle one) Board 1 or Board 1 Alternate Board 2 or Board 2 Alternate Board 3 or Board 3 Alternate
Enter your name, mailing address and daylime telephone number in the spaces provided. Because this form is a document available for public review, you may list your business/office address, telephone number and e-mail address in lieu of your home address or other personal contact information.
Do you authorize release of your private/personal information? U ves ILI no
Name: Shown R. Jell Home Address: - Blode lick Street
Name: Shawn Ridsell Home Address: Block Street City: San Francisco State: CA Zip code: 94117
Business Address: Orion Code: 946(3)
Home Phone: (573) 986-1300 Fax# (573) 986-1301
Pager #: N/A E-Mail Address: Daol. Com
Are you a United States citizen, or a resident alien who is eligible for and has applied for citizenship? Yes No
Have you ever been convicted of a feleny in this state, or convicted of any offense which, if committed in this state, would be a felony? Yes 12100
(If yes, please attach a statement describing the offense(s) for which you have been convicted, the date of the conviction(s), and the court(s) that convicted you.)
Pursuant to Ordinance No. 393-98 the following qualifications are required:
A person shall not be eligible for nomination for membership on an assessment appeals board unless he or she has a minimum of five years' professional experience in this state as one of the following: (1) certified public accountant; (2) licensed real estate broker; (3) attorney; or (4) property appraiser accredited by a nationally recognized professional organization, or property appraiser certified by either the Office of Real Estate Appraiser or by the State Board of Equalization. Documentation of qualifying experience must be submitted with this application form. This requirement does not apply to incumbent board members nominated for appointment to their same seats.
Please state your qualifications: I am an antimery with 15 years of expanience I also have 5 years of expansions as an 675147
Please state your business and/or professional experience: 15-leary of experience. as an inferred. Please See affected resume.
Occupation: Attorned Education: B.S., J.O. From USF.
·Civic Activities: 130-12 Member, USF Alumni, Volunteer Afformal, ALRP
Ethnicity (optional): Sex (optional): M F
Other Personal Information (optional)
Would you be able to attend Day Meetings? Yes No Evening meetings? Yes No How many days a week would you be available for hearings? How many evenings a week? /- 2 Have you attended an Assessment Appeals Board meeting? Yes No
Appearance before the RULES COMMITTEE is a requirement before any appointment can be made. Please Note: Your application will be retained for one year. Date: Applicant's Signature; Applicant's Signature;
Applicant's digitatule,
For Office Use Only: Appointed to Board #: Seat #: Term Expires: Revised July 2013

SHAWN RIDGELL BRODERICK STREET SAN FRANCISCO, CA 94117 TELEPHONE (415)

Email: <u>Daol.com</u>

EDUCATION

UNIVERSITY OF SAN FRANCISCO SCHOOL OF LAW

Juris Doctor Degree, May 1996 Staff Member, Maritime Law Journal Tutor in the Academic Support Program

UNIVERSITY OF SAN FRANCISCO

Bachelor of Science in Business Administration, May 1991 Member of the Disciplinary Hearing Committee Named Who's Who Among Students in American Universities

WORK EXPERIENCE

MANAGING ATTORNEY, JANUARY, 2007- PRESENT

RIDGELL & LAWLOR, LLP; Oakland, CA

Client representation in civil litigation and business matters. Areas of practice include contracts, consumer litigation, business litigation, business formation, insurance litigation, personal injury, and elder abuse. Client representation in mediations, arbitrations, administrative hearings, and trial.

ARBITRATOR, JANUARY, 2008-PRESENT

FINANCIAL INDUSTRY REGULATORY AUTHORITY (FINRA); San Francisco, CA

Responsible for hearing and deciding disputes arising out of breach of contract and employment law matters within the securities industry. Reviewed pleadings and other documents in evaluating disputes. Issued rulings on discovery matters.

ATTORNEY, 2001-2006

CHARLES SCHWARTZ, P.C.; Oakland, CA

Client representation in civil litigation and business matters. Areas of practice include contracts, consumer litigation, business litigation, business formation, insurance litigation, personal injury, and elder abuse. Represented clients in mediations, arbitrations, administrative hearings, and trial. Assumed sole responsibility for own case files.

LEGAL EDITOR, 1999-2006

CONTINUING EDUCATION OF THE BAR; Oakland, CA

Conducted extensive legal research on various legal subjects, including areas involving business law, civil litigation, real property, and estate planning. Assisted in editing legal publications.

ATTORNEY, 1999-2001

SHAWN RIDGELL, ATTORNEY AT LAW; San Francisco, CA Client representation in civil litigation and business matters.

LAW CLERK, 1997-1998

LAW OFFICES OF JOHN D. WINER; San Francisco, CA Participated in Civil discovery, including preparing clients for Deposition testimony. Drafted legal memoranda. LAW CLERK, 1996-1997

FRANCOIS SORBA, ATTORNEY AT LAW; San Mateo, CA Conducted legal research on real estate and construction matters. Drafted discovery requests and legal memoranda.

LAW CLERK, FEBRUARY 1996 - MAY, 1996

RICE, FOWLER, BOOTH, & BANNING; San Francisco, CA

Participant in the law firm's externship program. Conducted legal research on maritime issues. Drafted Motions and legal memoranda. Attended depositions.

LAW CLERK, JUNE 1995- NOVEMBER 1995

RICHTER, SENN & PALUMBO; San Francisco, CA

Conducted legal research on real estate, construction, and business matters.

Drafted Motions and legal memoranda.

PROFESSIONAL ASSOCIATIONS

San Francisco Bar Association, Member Alameda County Bar Association, Member California Bar Association, Member

VOLUNTEER ACTIVITIES

Volunteer Attorney, Bar Association of San Francisco Volunteer Attorney, AIDS Legal Referral Service (ALRP) University of San Francisco Alumni Board of Directors

AWARDS.

Outstanding Volunteer in Public Service Award, Bar Association of San Francisco, 2004

Award for Outstanding Volunteer, AIDS Legal Referral Service, 2009



STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Received

Please type or print in ink.

,,,,,,,	Ridsell S	(FIRST) (MIDDLE)	
1. (Office, Agency, or Court		
	Agency Namo		
755	essment Appeals Board	Board Manser	
Ī	Division, Board, Department, District, if applicable	Your Position	
-			
	▶ If filing for multiple positions, list below or on an attachment.		
	Agency;	Position:	
		1 Odnost	
	Jurisdiction of Office (Check at least one box)		
	State	Judge or Court Commissioner (Statewide Jurisdiction)	
l r	Multi-County	Ecounty of 5an Francises	
	arcity of	Other	
3.	Type of Statement (Check at least one box)		
8	Annual: The period covered is January 1, 2012, through December 31, 2012.	Leaving Office: Date Left/(Check one)	
	The period covered is/, through December 31, 2012.	 The period covered is January 1, 2012, through the date of leaving office. 	
$\int_{0}^{1} G$	Assuming Office: Date assumed/	 The period covered is	
6 J	Candidate: Election year and office sought, if different than Part 1:		
	Schedule Summary		
(Check applicable schedules or "None." ► Total	I number of pages including this cover page:	
	Schedule A-1 - Investments – schedule attached	Schedule C - Income, Loans, & Business Positions - schedule attached	
L N	Schedule A-2 - Investments – schedule attached Schedule B - Real Property – schedule attached	Schedule D - Income - Gifts - schedule attached	
y	-or-	Schedule E - Income – Gifts – Travel Payments – schedule attached	
	☑ None - No reportable interes	esis on any schedule	
5. V	erification	·	
N (s	WILING ADDRESS STREET CITY Business or Agency Address Recommended - Public Document)	STATE ZIP CODE	
· ·	2128 Blowdowy Outle	ord CA 94612	
	AYTIME TELEPHONE NUMBER 575) 986-1300	E-MAIL ADDRESS (OPTIONAL)	
<u>,</u>		3 au1. csm	
h	Wearing statement and to the pest of my knowledge the information contained this is a public document.		
	certify under penalty of perjury under the laws of the State of Callforr		
מ	ate Signed 9/19/13	ignature— St. Diylo	
	(month day, year)	(File the originally signed statement with your filing official.)	

Wednesday, October 2, 2013

HAISTERNA LONG THAT THE TRANSPORT

ATTORNEY SEARCH

Shawn Ridgell - #201179

Current Status: Active

This member is active and may practice law in California.

See below for more details.

Profile Information

The following information is from the official records of The State Bar of California.

Bar

201179

Number: Address:

Ridgell & Lawlor

Phone Number:

(510) 986-1300

2128 Broadway

Fax Number:

(510) 986-1301

Oakland, CA

94612 Map it

LLP

e-mail:

⊉aol.com

County:

Alameda

Undergraduate

Univ of San Francisco; San Francisco

School:

District:

District 1

Sections:

Business Law

Law School:

U of San Francisco SOL; San Francisco

CA

CA

Status History

Effective Date

Status Change

Present

Active

6/7/1999

Admitted to The State Bar of California

Explanation of member status

Actions Affecting Eligibility to Practice Law Disciplinary and Related Actions

Overview of the attorney discipline system.

This member has no public record of discipline.

Administrative Actions

This member has no public record of administrative actions.

Start New Search »



Board of Supervisors City and County of San Francisco 1 Dr. Carlton B. Goodlett Place, Room 244 (415) 554-5184 FAX (415) 554-7714

Application for Boards, Commissions, Committees, & Task Forces

Task Forces
Name of Board, Commission, Committee, or Task Force: Assessment Appeals Board
Seat # or Category (If applicable):N.A
Name: Yosef Tahbazof
Home Address:Burnett Ave, San Francisco Zip: 94131
Home Phone: 415. Occupation: Attorney
Work Phone: 415.922.0200 x 111 Employer: Tahbazof Law Firm
Business Address: 1256 Howard Street, San Francisco Zip: 94103
Business E-Mail: Yosef@tahbazoflaw.com Home E-Mail:
Pursuant to Charter Section 4.101 (a)2, Boards and Commissions established by the Charter must consist of electors (registered voters) of the City and County of San Francisco. For certain other bodies, the Board of Supervisors can waive the residency requirement.
Check All That Apply:
Registered voter in San Francisco: Yes - No - If No, where registered:
Resident of San Francisco Tyes No If No, place of residence:
Pursuant to Charter section 4.101 (a)1, please state how your qualifications represent the communities of interest, neighborhoods, and the diversity in ethnicity, race, age, sex, sexual orientation, gender identity, types of disabilities, and any other relevant demographic qualities of the City and County of San Francisco:
I was born in San Francisco shortly after my family immigrated from Iran. I have always enjoyed and cared for the city which was one of the main reasons I pursued my legal education at UC Hastings. In my professional capacity, I have had the pleasure of working with a broad spectrum of community members and have often collaborated closely with neighborhood groups as well as community organizations.

T have worked	professional experience	<u>:</u>
tay aggount	in the following capacit:	ies: attorney, property manager,
cax accountant	, and paralegal.	
Civic Activities:		
I have also en	for Mayor Gavin Newsom a	nd Supervisor Michela Alioto-Pier.
Homelessness.	Joyed volunteering at the	nd Supervisor Michela Alioto-Pier. e Shelter Network and Home Away from
		•
or appointments bequirement before	by the Board of Supervisors	, appearance before the RULES COMMITTEE is
efore the schedule	ed hearing.)	, appearance before the RULES COMMITTEE is lade. (Applications must be received 10 days
		•
	•	
ate: 10.25.2013	Applicant's Signature	· (required)
	I-p	(required)
<i>lease Note</i> : Your all att	application will be retained tachments, become public re	for one year. Once Completed, this form, includir
	•	
OR OFFICE USE ONL		
ppointed to Seat #:	Term Expires:	Date Seat was Vacated:
/20/12	The state of the s	Yaoatou.

September 9, 2013

Supervisor Norman Yee Rules Committee Chair Board of Supervisors City Hall 1 Dr. Carlton B. Goodlett Place San Francisco, CA 94102

Dear Supervisor Yee:

Please consider the enclosed resume as an application to serve our City in whatever capacity you deem necessary and fitting. Should you have any questions or desire to meet with me, I will make myself available at your convenience.

Sincerely,

Yosef Tahbazof

TAHBAZOF LAW FIRM, LLP

Howard Street • San Francisco, CA 94103 • (415) 922-0200 x 111 • yosef@tahbazoflaw.com

EDUCATION

University of California, Hastings College of the Law, San Francisco, CA Juris Doctor, 2011

Santa Clara University, Santa Clara, CA Bachelor of Science in Commerce, 2008

EXPERIENCE

Tahbazof Law Firm, San Francisco, CA Partner

August 2011 - Present

- Drafted contracts including real property purchase agreements, LLC operating agreements, stipulations, settlement agreements, prime contracts, subcontractor agreements, lease agreements, employment contracts.
- Negotiated informal settlements resulting in fair compromises and avoidance of cumbersome litigation.
- Represented clients in disputes and cases concerning mechanics' liens, construction defects, unlawful detainers, breach of contractual obligations.

SST Investments, San Francisco, CA Manager

August 2011 - Present

- Management of hundreds of rental units including mediation of conflicts with tenants and neighbors; implementation of innovative work order tracking system; ensuring prompt repairs; coordinating with independent contractors; acquiring and maintaining proper documentation; resolving tenant complaints; ensuring legal compliance of operations.
- Created project-specific construction accounting programs.
- Secured over \$10 million in financing for construction projects.
- Successfully led refinancing efforts for dozens of apartment buildings.
- Construction management including negotiating supply and service contracts; overseeing quality of work; utility applications; accounting for expenses.

Ross Madden Law, San Francisco, CA Intern

May 2010 - August 2010

- Drafted various forms of pleadings and motions.
- Data acquisition and forensic analysis used to uncover latent causes of action.
- Assisted in informal negotiations and discussions with opposing parties.

Price Waterhouse Coopers, San Francisco, CA

May 2007 - September 2007

- Transfer Pricing and Corporate Accounting Intern
- Implemented corporate guidelines and Generally Accepted Accounting Principles (GAAP) to prepare unified documents for the financial reporting of publicly traded corporations.
- Translated financial information into user-friendly formats for clientele.
- Researched Transfer Pricing Division guarantee agreements, capital infusion agreements and capital support agreements.
- Proactively participated in weekly staff meetings and coordinated large documents with and between associates for joint clients.

Effective Solutions, San Mateo, CA

June 2006 - September 2006

Assistant Property Manager

- Responded to and satisfied tenant requests for property repairs.
- Mediated conflicts between landlords, tenants and neighbors.
- Managed and coordinated schedules of multiple contractors and merchants to maximize productivity.
- Assignments consisted of the removal and subsequent reinstallation of hardwood, sheetrock, and insulation as well as applying exterior and interior paint.

ACTIVITIES

Campaign Volunteer: San Francisco Supervisor Michela Alioto-Pier (2004) & San Francisco Mayor Gavin Newsom (2003)

Volunteer: Shelter Network, Home Away from Homelessness

Other: Setar (Persian classical instrument), Accounting Tutor, Law School Tutor

San Francisco BOARD OF SUPERVISORS

Date Printed:

October 25, 2013

Date Established:

December 24, 1998

Active

ASSESSMENT APPEALS BOARD NO. 2

Contact and Address:

Dawn Duran Assessment Appeals Board City Hall, Room 405

Phone: (415) 554-6778 Fax: (415) 554-6775

Email: Dawn.Duran@sfgov.org

Authority:

Administrative Code Chapter 2B et seq.; Added by Ordinance 37-67, approved 1/31/67; amended by Ordinance No. 393-98, approved 12/24/1998; amended by Ordinance No. 273-99, approved 10/27/99.

Board Qualifications:

The Assessment Appeals Board No. 2 consists of eight members, five regular members, and three alternate members all of whom are appointed by the Board of Supervisors.

No person may concurrently hold a seat on Assessment Appeals Board No. 1 and a seat on Assessment Appeals Board No. 2.

The Board members' term of office is three years, beginning on the first Monday in September. In the event of a vacancy, the newly appointed member shall serve for the remainder of the unexpired term.

The Board shall have the following qualifications as stated in the eligibility criteria set forth in Section 1624.05 of the California Revenue and Taxation Code as follows: Must have a minimum of five years professional experience in the State of California as one of the following: Certified Public Accountant (CPA) or Public Accountant (PA); licensed Real Estate Broker; Attorney; or a Property Appraiser accredited by a nationally recognized professional organization, or Property Appraiser certified by the Office of Real Estate Appraiser; or he or she is a current member of an assessment appeals board.

Hearing Officers: The regular and alternate members of the Board shall also serve as hearing

San Francisco BOARD OF SUPERVISORS

officers. The Clerk shall designate members to act as hearing officers for particular applications using a rotating system designed to assure that all members with the same priority level, as described in this subsection, have an equal opportunity over time to participate as hearing officers. The Clerk shall designate hearing officers in the following priority order: (a) the alternate members of Assessment Appeals Board No. 2: (b) the alternate members of Assessment Appeals Board No. 2; and (d) the regular members of Assessment Appeals Board No. 1. In their capacity as assessment hearing officers, the officers shall serve at the pleasure of and by contract with the Board of Supervisors.

It shall be the duty of each Assessment Appeals Board to equalize the valuation of the taxable property within the City and County for the purposes of taxation in the manner and subject to the limitations contained in Article XIII of the California State Constitution. Assessment Appeals Board No. 2 shall have jurisdiction to only hear applications for reduction for property on the secured or unsecured rolls assessed at less than \$50,000,000, excluding applications involving possessory interests or real property located all or in part within Assessor's Blocks 1 - 876, inclusive, or Assessor's Blocks 3701-3899 inclusive. Except not including residential real property on the secured roll consisting of four units or less that is located all or in part within those blocks.

Report: Pursuant to Section 1639 of the Revenue and Taxation Code, the hearing officer shall prepare a summary report of the proceedings together with a recommendation on the application and shall transmit this report and recommendation to the Clerk of the Board of Supervisors.

Compensation: (\$100 for each one-half day of service.)

Sunset Clause: None