

File No. 130330

Committee Item No. 5

Board Item No. _____

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Rules

Date 5/16/13

Board of Supervisors Meeting

Date _____

Cmte Board

- | | | |
|-------------------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Motion |
| <input type="checkbox"/> | <input type="checkbox"/> | Resolution |
| <input type="checkbox"/> | <input type="checkbox"/> | Ordinance |
| <input type="checkbox"/> | <input type="checkbox"/> | Legislative Digest |
| <input type="checkbox"/> | <input type="checkbox"/> | Budget Analyst Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Legislative Analyst Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Youth Commission Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Introduction Form (for hearings) |
| <input type="checkbox"/> | <input type="checkbox"/> | Department/Agency Cover Letter and/or Report |
| <input type="checkbox"/> | <input type="checkbox"/> | MOU |
| <input type="checkbox"/> | <input type="checkbox"/> | Grant Information Form |
| <input type="checkbox"/> | <input type="checkbox"/> | Grant Budget |
| <input type="checkbox"/> | <input type="checkbox"/> | Subcontract Budget |
| <input type="checkbox"/> | <input type="checkbox"/> | Contract/Agreement |
| <input type="checkbox"/> | <input type="checkbox"/> | Award Letter |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Application |
| <input type="checkbox"/> | <input type="checkbox"/> | Public Correspondence |

OTHER

(Use back side if additional space is needed)

<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____

Completed by: Linda Wong

Date 5/13/13

Completed by: _____

Date _____

An asterisked item represents the cover sheet to a document that exceeds 25 pages. The complete document is in the file.



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

Name of Board, Commission, Committee, or Task Force: Joint of Market Stabilization Fund Community Advisory Committee

Seat # or Category (If applicable): Senior District: _____

Name: CARMELITA PEREZ

Home Address: — HOWARD ST. APT #401 SF CA Zip: 94103

Home Phone: (650) — Occupation: UNEMPLOYED

Work Phone: _____ Employer: _____

Business Address: _____ Zip: _____

Business E-Mail: _____ Home E-Mail: _____ @yahoo.com

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 ☒ Yes ☐ 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 AN IMMIGRANT AND I AM A SENIOR CITIZEN LIVING IN SAN FRANCISCO FOR 10 MONTHS
I AM CURRENTLY A VOLUNTEER AT THE DAMAYAN COMM GROUP AND CARON KIP SENIOR CENTER
I'D BEEN ACTIVE TO THE SOMA COMMUNITY, ATTEND RALLIES INVOLVED W/ FILIPINO COMMUNITY
I HAD A HARD TIME LIVING HERE AND I UNDERSTOOD THE NEED FOR A COMFORTABLE AND AFFORDABLE HOUSING.

Business and/or professional experience:

Administrator - since 2005 - 2012
In charge of the residents at the RCPE, administering medicines and the preparation of the residents' good nutrition.
CAREGIVER - 2005 - 2009
I bathed the residents, cooked and fed in the laundry and other chores.

Civic Activities:

- 1) DAMAZAN Community Group
- 2) CANNON KIP - EPISCOPAL Community Services
- 3) ATTENDED RALLIES such as
SHADE BOX
PROPOSITION C and E

Have you attended any meetings of the Board/Commission to which you wish appointment?

Yes ☒ No ☐

For appointments by the Board of Supervisors, appearance before the RULES COMMITTEE is a requirement before any appointment can be made. (Applications must be received 10 days before the scheduled hearing.)

Date: 12/19/12 Applicant's Signature: (required) Casmeloy R. P. 7

Please Note: Your application will be retained for one year. Once Completed, this form, including all attachments, become public record.

FOR OFFICE USE ONLY:

Appointed to Seat #: _____ Term Expires: _____ Date Seat was Vacated: _____

Wong, Linda (BOS)

From: [caroline.calderon@gmail.com on behalf of Caroline Calderon
[caroline.calderon@vetsequitycenter.org]
Sent: Friday, February 22, 2013 5:26 PM
To: Wong, Linda (BOS)
Subject: Application for South of Market Stabilization Fund Community Advisory Committee ATTN: Angela Calvillo
Attachments: Perez, Carmelita - SOMA CAC Application.pdf

Hello,

I am submitting an application for the South of Market Stabilization Fund Community Advisory Committee on behalf of Carmelita Perez.

Thank You,

--

Caroline Calderon
Outreach Coordinator/Program Assistant
Bill Sorro Housing Program

Veterans Equity Center
1010 Mission Street, Suite C
San Francisco, CA 94103
415.255.2347 Tel. 415.255.2358 Fax

554-7974



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

Name of Board, Commission, Committee, or Task Force: SOMA STABILIZATION Fund

Seat # or Category (If applicable): SEAT 3 ^{Senior/Disabled living in} SOMA District: 6

Name: M. ALICIA DUKE AKA "SAM"

Home Address: Folsom ST 504 Zip: 94107

Home Phone: ^{+msg.} 415 Occupation: Retired

Work Phone: NA Employer: NA

Business Address: NA Zip: _____

Business E-Mail: NA Home E-Mail: NA

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 ☒ Yes ☐ 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:

Dictated to
Sarah
Jarmay

I am an older woman with a moderate disability who has been very active in supporting the mental health com., gay/lesbian community, tenderloin, Bayview. I have lived in San Francisco since January, 1988. District 6 is important to me, been involved with Paratransit and disability & senior issues. and many others. I lived in an SRO for 6 years. I'm still active in the SRO community

Business and/or professional experience:

Multiplicity of Jobs: all fields. Last employed 1966 to 1983 STATE OF CA. Lands Div Cost Acctg Supervised Acctg; Corporations Supv. Acctg; Criminal Justice Retrieved money Supv Office; 10-77 on Dept Aging-Federal Senior Center money Direct Program DC to Center then DC to STATE to Counties to 1-83. R.N. Private Home Care in special work 2-85 to 3-86

Civic Activities:

Political volunteer-Variou-1951 to date LA-Omaha NYC-Mpls-SF. "Redevelopment" NYC & SF, SOMA MidMKT PACS. Committees for SOMA 4th ST Market, Mental Health clinics, Tenderloin Sup. Hsg, YBC on son Team, Planning For Elders board 8 yrs, Active in many groups and para transit activities (PCC board 8 yrs)

Have you attended any meetings of the Board/Commission to which you wish appointment?

Yes ☐ No ☒

For appointments by the Board of Supervisors, appearance before the RULES COMMITTEE is a requirement before any appointment can be made. (Applications must be received 10 days before the scheduled hearing.)

Date: 11/30/12 Applicant's Signature: (required) M. M. M.

Please Note: Your application will be retained for one year. Once Completed, this form, including all attachments, become public record.

FOR OFFICE USE ONLY:

Appointed to Seat #: _____ Term Expires: _____ Date Seat was Vacated: _____

01/20/12

Wong, Linda (BOS)

From: Veneracion, April
Sent: Tuesday, December 04, 2012 5:20 PM
To: Del Rosario, Claudine; Mormino, Matthias; Wong, Linda (BOS)
Subject: SoMa Stabilization Fund Application - Seat 3 Senior/ Disability
Attachments: SoMa Stabilization Fund Application.pdf

Attached please find an application that I received for the SoMa Stabilization Fund – Seat 3.

Thanks!

April Veneracion Ang
Legislative Aide
Supervisor Jane Kim, District Six
San Francisco Board of Supervisors
(415) 554-7972 Office
(415) 554-7974 Fax
april.veneracion@sfgov.org

San Francisco
BOARD OF SUPERVISORS

Date Printed: April 9, 2013

Date Established: August 19, 2005

Active

SOMA COMMUNITY STABILIZATION FUND COMMUNITY ADVISORY COMMITTEE

Contact and Address:

Claudine Del Rosario
1 So. Van Ness Avenue
5th Floor
San Francisco, CA 94103

Phone: (415) 701-5580

Fax: (415) 749-2501

Email: claudine.delrosario@sfgov.org

Authority:

Planning Code Section 418.7(b), Ord. No. 108-10.
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Board Qualifications:

<p>The SOMA Community Stabilization Fund Community Advisory Committee shall advise Mayor's Office of Community Development (MOCD) and the Board of Supervisors on the administration of the SOMA Community Stabilization Fund.</p>
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<p>The Community Advisory Committee shall be composed of seven members appointed as follows: one member representing low-income families who lives with his or her family in SOMA; one member who has expertise in employment development and/ or represents labor; one member who is a senior or disabled resident of SOMA; one member with affordable housing expertise and familiarity with the SOMA neighborhood; one member who represents a community-based organization in SOMA; one member who provides direct services to SOMA families; one member who has small business expertise and a familiarity with the SOMA neighborhood.</p>

<p>The Community Advisory Committee shall comply with all applicable public records and meetings laws and shall be subject to the Conflict of Interest provisions of the City's Charter and Administrative Code. The initial meeting of the Advisory Committee shall be called within 30 days from the day the Board of Supervisors completes its initial appointments. MOCD shall provide administrative support to the Committee.</p>

<p>The members of the Community Advisory Committee shall be appointed for a term of two</p>

San Francisco
BOARD OF SUPERVISORS

years; provided, however, that the members first appointed shall, by lot at the first meeting, classify their terms so that three shall serve for a term of one year and four shall serve for a term of two years. At the initial meeting of the Committee and yearly thereafter, the Committee members shall select such officer or officers as deemed necessary by the Committee. The Committee shall promulgate such rules or regulations as are necessary for the conduct of its business under this Section. In the event a vacancy occurs, a successor shall be appointed to fill the vacancy consistent with the process and requirements to appoint the previous appointee. When a vacancy occurs for any reason other than the expiration of a term of office, the appointee to fill such vacancy shall hold office for the unexpired term of his or her predecessor. Any appointee who misses four meetings within a 12-month period, without the approval of the Committee, shall be deemed to have resigned from the Committee.

Within 90 days of the effective date of Dection 418.1 et seq., the Director of MOCD shall propose rules, regulations and a schedule for administrative support governing the SOMA Community Stabilization Fund to the Board of Supervisors for its approval.

Reports: The Committee shall develop annual recommendations to MOCD on the Expenditure Plan.

Sunset Date: None.