

File No. 131047

Committee Item No. 8

Board Item No. \_\_\_\_\_

# COMMITTEE/BOARD OF SUPERVISORS

## AGENDA PACKET CONTENTS LIST

Committee: Rules Committee

Date October 31, 2013

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 and Legislative Analyst Report        |
| <input type="checkbox"/>            | <input type="checkbox"/> | Youth Commission Report                      |
| <input type="checkbox"/>            | <input type="checkbox"/> | Introduction Form                            |
| <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"/> | Form 126 – Ethics Commission                 |
| <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 checked="" type="checkbox"/> | <input type="checkbox"/> | <u>Form 700</u> |
| <input type="checkbox"/>            | <input type="checkbox"/> | _____           |
| <input type="checkbox"/>            | <input type="checkbox"/> | _____           |
| <input type="checkbox"/>            | <input type="checkbox"/> | _____           |
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| <input type="checkbox"/>            | <input type="checkbox"/> | _____           |
| <input type="checkbox"/>            | <input type="checkbox"/> | _____           |
| <input type="checkbox"/>            | <input type="checkbox"/> | _____           |

Completed by: Linda Wong Date October 28, 2013

Completed by: \_\_\_\_\_ Date \_\_\_\_\_

**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 daytime 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?  yes  no

Name: Shawn Ridgell Home Address: Biederick Street

City: San Francisco State: CA Zip code: 94117

Business Address: 2128 Broadway City: Oakland State: CA Zip Code: 94612

Home Phone: 415 Work Phone: (510) 986-1300 Fax #: (510) 986-1301

Pager #: N/A E-Mail Address: saol.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 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 same seats.

Please state your qualifications: I am an attorney with 15 years of experience. I also have 5 years of experience as an arbitrator.

Please state your business and/or professional experience: 15 years of experience as an attorney. Please see attached resume.

Occupation: Attorney Education: B.S., J.O. From USF.

Civic Activities: Board member, USF Alumni, Volunteer Attorney, 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? 2-3 How many evenings a week? 1-2

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: 9/19/13 Applicant's Signature: Shawn Ridgell

For Office Use Only: Appointed to Board #: \_\_\_\_\_ Seat #: \_\_\_\_\_ Term Expires: \_\_\_\_\_

SHAWN RIDGELL  
— BRODERICK STREET  
SAN FRANCISCO, CA 94117  
TELEPHONE (415) ————  
Email: — [shawn@ridgell.com](mailto:shawn@ridgell.com)

**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

COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST) Ridgell (FIRST) Shawn (MIDDLE)

1. Office, Agency, or Court

Agency Name Assessment Appeals Board  
 Division, Board, Department, District, if applicable Board Member  
 Your Position

► If filing for multiple positions, list below or on an attachment.

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

2. Jurisdiction of Office (Check at least one box)

- State
- Multi-County \_\_\_\_\_
- City of San Francisco
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of San Francisco
- Other \_\_\_\_\_

3. Type of Statement (Check at least one box)

- Annual: The period covered is January 1, 2012, through December 31, 2012.
- or-
- The period covered is \_\_\_\_\_, through December 31, 2012.
- Leaving Office: Date Left \_\_\_\_\_ (Check one)
- The period covered is January 1, 2012, through the date of leaving office.
- The period covered is \_\_\_\_\_, through the date of 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: -0-

- Schedule A-1 - Investments - schedule attached
- Schedule A-2 - Investments - schedule attached
- Schedule B - Real Property - schedule attached
- Schedule C - Income, Loans, & Business Positions - schedule attached
- Schedule D - Income - Gifts - schedule attached
- Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-  
 None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS (Business or Agency Address Recommended - Public Document)  
 STREET 2128 Broadway CITY Oakland STATE CA ZIP CODE 94612  
 DAYTIME TELEPHONE NUMBER (510) 986-1300 E-MAIL ADDRESS (OPTIONAL) shawn@adl.com

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.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 9/19/13  
 (month, day, year)

Signature [Signature]  
 (File the originally signed statement with your filing official.)

### 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 Number:	201179		
Address:	Ridgell & Lawlor LLP 2128 Broadway Oakland, CA 94612 Map It	Phone Number:	(510) 986-1300
		Fax Number:	(510) 986-1301
		e-mail:	sridgell@aol.com
County:	Alameda	Undergraduate School:	Univ of San Francisco; San Francisco CA
District:	District 1		
Sections:	Business Law	Law School:	U of San Francisco SOL; San Francisco 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 »

**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 daytime 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?  yes  no

Name: Kristine Nelson Home Address: 1001 Dr. Carlton B. Goodlett Pl # 405  
1001 Buena Vista Way  
 City: San Francisco State: CA Zip code: 94117  
 Business Address: 601 Buena Vista W City: SF State: CA Zip Code: 94117  
 Home Phone: \_\_\_\_\_ Work Phone: 415-706-0995 Fax #: \_\_\_\_\_  
 Pager #: \_\_\_\_\_ E-Mail Address: Kristyna@leffers.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 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 same seats.

Please state your qualifications: Certified Real Estate Appraiser

Please state your business and/or professional experience: Real Estate Appraiser, Chief Appraiser, Review Appraiser, Real Estate Agent

Occupation: Appraiser, Real Estate Agent Education: BA UCLA

Civic Activities: Randall Museum, SPEAK, CSB-school

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? 4 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: 9/9/2013 Applicant's Signature: \_\_\_\_\_

For Office Use Only: Appointed to Board #: \_\_\_\_\_ Seat #: \_\_\_\_\_ Term Expires: \_\_\_\_\_

Kristy Nelson

kristy@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 #AG007334

California Real Estate Sales License #00884857



STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE

Date Received  
Official Use Only

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Nelson Kristine Ann

1. Office, Agency, or Court

Agency Name  
Assessment appeals Board  
Division, Board, Department, District, if applicable  
Your Position  
Board 3

► If filing for multiple positions, list below or on an attachment.

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

2. Jurisdiction of Office (Check at least one box)

- State
- Multi-County \_\_\_\_\_
- City of San Francisco
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of \_\_\_\_\_
- 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 Left \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)
  - The period covered is January 1, 2012, through the date of leaving office.
  - The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.
- or- The period covered is 09 / 01 / 2013, through December 31, 2012.
- 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: 8

- Schedule A-1 - Investments - schedule attached
- Schedule A-2 - Investments - schedule attached
- Schedule B - Real Property - schedule attached
- Schedule C - Income, Loans, & Business Positions - schedule attached
- Schedule D - Income - Gifts - schedule attached
- Schedule E - Income - Gifts - Travel Payments - schedule attached
- or- None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)  
1 Dr. Carlton B Goodlett pl #405 San Francisco Ca 94102  
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS (OPTIONAL)  
( 415 ) \_\_\_\_\_

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.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 9/10/2013  
(month, day, year)

Signature \_\_\_\_\_  
(File the originally signed statement 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 700  
FAIR POLITICAL PRACTICES COMMISSION

Name  
Kristine Nelson

NAME OF BUSINESS ENTITY  
PGE

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
electricity

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

NAME OF BUSINESS ENTITY  
Cisco

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Computers

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

NAME OF BUSINESS ENTITY  
Intel

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Chip maker

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

NAME OF BUSINESS ENTITY  
Southern Copper

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Copper

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

NAME OF BUSINESS ENTITY  
Hewlett Packard

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Computers

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

Comments:

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

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

Name  
 Kristine Nelson

**1. BUSINESS ENTITY OR TRUST**  
**Leffers Family Trust**  
 Name \_\_\_\_\_  
 Address (Business Address Acceptable) \_\_\_\_\_  
 Check one  
 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                                      \_\_\_\_\_ / \_\_\_\_\_ / 12    \_\_\_\_\_ / \_\_\_\_\_ / 12  
 \$2,000 - \$10,000                                      ACQUIRED                      DISPOSED  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

NATURE OF INVESTMENT  
 Partnership     Sole Proprietorship     \_\_\_\_\_ Other

YOUR BUSINESS POSITION \_\_\_\_\_

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

\$0 - \$499                       \$10,001 - \$100,000  
 \$500 - \$1,000                       OVER \$100,000  
 \$1,001 - \$10,000

**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                       REAL PROPERTY

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

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000                                      \_\_\_\_\_ / \_\_\_\_\_ / 12    \_\_\_\_\_ / \_\_\_\_\_ / 12  
 \$10,001 - \$100,000                                      ACQUIRED                      DISPOSED  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

NATURE OF INTEREST  
 Property Ownership/Deed of Trust     Stock     Partnership

Leasehold \_\_\_\_\_ Yrs. remaining     Other \_\_\_\_\_

Check box if additional schedules reporting investments or real property are attached

**1. BUSINESS ENTITY OR TRUST**  
 Name \_\_\_\_\_  
 Address (Business Address Acceptable) \_\_\_\_\_  
 Check one  
 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                                      \_\_\_\_\_ / \_\_\_\_\_ / 12    \_\_\_\_\_ / \_\_\_\_\_ / 12  
 \$2,000 - \$10,000                                      ACQUIRED                      DISPOSED  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

NATURE OF INVESTMENT  
 Partnership     Sole Proprietorship     \_\_\_\_\_ Other

YOUR BUSINESS POSITION \_\_\_\_\_

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

\$0 - \$499                       \$10,001 - \$100,000  
 \$500 - \$1,000                       OVER \$100,000  
 \$1,001 - \$10,000

**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                       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 Precise Location of Real Property

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000                                      \_\_\_\_\_ / \_\_\_\_\_ / 12    \_\_\_\_\_ / \_\_\_\_\_ / 12  
 \$10,001 - \$100,000                                      ACQUIRED                      DISPOSED  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

NATURE OF INTEREST  
 Property Ownership/Deed of Trust     Stock     Partnership

Leasehold \_\_\_\_\_ Yrs. remaining     Other \_\_\_\_\_

Check box if additional schedules reporting investments or real property are attached

Comments: \_\_\_\_\_

**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

Name  
Kristine Nelson

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
62-64 Moss Street

CITY  
San Francisco

FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

IF APPLICABLE, LIST DATE:  
ACQUIRED     /     / 12      DISPOSED     /     / 12

NATURE OF INTEREST  
 Ownership/Deed of Trust       Easement  
 Leasehold \_\_\_\_\_ Yrs. remaining       \_\_\_\_\_ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499       \$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.  
 None

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
621 Natoma Street

CITY  
San Francisco

FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

IF APPLICABLE, LIST DATE:  
ACQUIRED     /     / 12      DISPOSED     /     / 12

NATURE OF INTEREST  
 Ownership/Deed of Trust       Easement  
 Leasehold \_\_\_\_\_ Yrs. remaining       \_\_\_\_\_ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499       \$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.  
 None

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\* 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\* \_\_\_\_\_

ADDRESS (Business Address Acceptable) \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_

INTEREST RATE \_\_\_\_\_ %      TERM (Months/Years) \_\_\_\_\_  
 None

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000  
 Guarantor, if applicable

NAME OF LENDER\* \_\_\_\_\_

ADDRESS (Business Address Acceptable) \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_

INTEREST RATE \_\_\_\_\_ %      TERM (Months/Years) \_\_\_\_\_  
 None

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000  
 Guarantor, if applicable

Comments: \_\_\_\_\_

**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

Name  
Kristine Nelson

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
23-25 Moss Street

CITY  
San Francisco

FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

IF APPLICABLE, LIST DATE:  
 ACQUIRED     /     / 12      DISPOSED     /     / 12

NATURE OF INTEREST  
 Ownership/Deed of Trust       Easement  
 Leasehold \_\_\_\_\_ Yrs. remaining       \_\_\_\_\_ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499       \$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.  
 None

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
1316-1318 Fulton Street

CITY  
San Francisco

FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

IF APPLICABLE, LIST DATE:  
 ACQUIRED     /     / 12      DISPOSED     /     / 12

NATURE OF INTEREST  
 Ownership/Deed of Trust       Easement  
 Leasehold \_\_\_\_\_ Yrs. remaining       \_\_\_\_\_ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499       \$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.  
 None

\* 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\* \_\_\_\_\_

ADDRESS (Business Address Acceptable) \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_

INTEREST RATE \_\_\_\_\_ %       None      TERM (Months/Years) \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000  
 Guarantor, if applicable

NAME OF LENDER\* \_\_\_\_\_

ADDRESS (Business Address Acceptable) \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_

INTEREST RATE \_\_\_\_\_ %       None      TERM (Months/Years) \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000  
 Guarantor, if applicable

Comments: \_\_\_\_\_

**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
445-449 Tehama Street

CITY  
San Francisco

FAIR MARKET VALUE      IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000           /      / 12           /      / 12  
 \$100,001 - \$1,000,000      ACQUIRED      DISPOSED  
 Over \$1,000,000

NATURE OF INTEREST  
 Ownership/Deed of Trust       Easement  
 Leasehold       Other  
   Yrs. remaining      Yrs. remaining

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499       \$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.  
 None

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
\_\_\_\_\_

CITY  
\_\_\_\_\_

FAIR MARKET VALUE      IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000           /      / 12           /      / 12  
 \$100,001 - \$1,000,000      ACQUIRED      DISPOSED  
 Over \$1,000,000

NATURE OF INTEREST  
 Ownership/Deed of Trust       Easement  
 Leasehold       Other  
   Yrs. remaining      Yrs. remaining

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499       \$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.  
 None

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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NAME OF LENDER\*  
\_\_\_\_\_

ADDRESS (Business Address Acceptable)  
\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER  
\_\_\_\_\_

INTEREST RATE      TERM (Months/Years)  
\_\_\_\_\_ %       None      \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000  
 Guarantor, if applicable

\_\_\_\_\_

NAME OF LENDER\*  
\_\_\_\_\_

ADDRESS (Business Address Acceptable)  
\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER  
\_\_\_\_\_

INTEREST RATE      TERM (Months/Years)  
\_\_\_\_\_ %       None      \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000  
 Guarantor, if applicable

\_\_\_\_\_

Comments: \_\_\_\_\_





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

Kristine A. Nelson

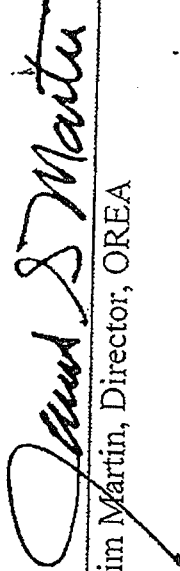
has successfully met the requirements for a license as a residential and commercial real estate appraiser in the State of California and is, therefore, entitled to use the title:

“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 007334

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

  
Jim Martin, Director, OREA

3007087



**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

RECEIVED  
 AUG 15 2013  
 Assessment Appeals Board

*Complete and return this original Application to the Assessment Appeals Board*

Application for Appointment to:  
 (Please circle one)

- |  |    |                   |
|--|----|-------------------|
| <input checked="" type="radio"/> Board 1 | or | Board 1 Alternate |
| <input checked="" type="radio"/> Board 2 | or | Board 2 Alternate |
| <input checked="" type="radio"/> 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 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?  yes  no

Name: JOHN M. LEE Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Business Address: 1 LETTERMAN DR. # C300 City: SAN FRANCISCO State: CA Zip Code: 94129

Home Phone: \_\_\_\_\_ Work Phone: 415 447-6231 Fax #: 415-447-6201

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  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 same seats.

Please state your qualifications: LICENSED REAL ESTATE BROKER SINCE 1988

Please state your business and/or professional experience: SALES OF REAL PROPERTY SINCE 1987. MANAGE & SUPERVISE REAL ESTATE SALES TEAM

Occupation: REAL ESTATE BROKER Education: MBA FROM UCLA, BS ENG. MECHANICAL

Civic Activities: REAL ESTATE NEWSPAPER COLUMNIST FOR RICHMOND REVIEW UC. BERKELEY AND SUNSET BEACON, PAST PRESIDENT AND BOARD MEMBER OF

Ethnicity (optional): ASIAN Sex (optional):  M  F VARIOUS ORGANIZATIONS

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? 1 How many evenings a week? 1

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: 8/15/2013

Applicant's Signature: [Signature]

For Office Use Only: Appointed to Board #: \_\_\_\_\_ Seat #: \_\_\_\_\_ Term Expires: \_\_\_\_\_

STATEMENT OF ECONOMIC INTERESTS  
 COVER PAGE

Date Received  
 (For Use Only)

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
 Lee John M.

1. Office, Agency, or Court

Agency Name  
 Assessment Appeals Board  
 Division, Board, Department, District, if applicable  
 Your Position  
 Commissioner

► If filing for multiple positions, list below or on an attachment.

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

2. Jurisdiction of Office (Check at least one box)

- State
- Multi-County \_\_\_\_\_
- City of San Francisco
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of San Francisco
- Other \_\_\_\_\_

3. Type of Statement (Check at least one box)

- Annual: The period covered is January 1, 2012, through December 31, 2012.
- or-
- The period covered is \_\_\_\_\_, through December 31, 2012.
- Assuming Office: Date assumed 09 / 01 / 2013
- Candidate: Election year \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_
- Leaving Office: Date Left \_\_\_\_\_ (Check one)
- The period covered is January 1, 2012, through the date of leaving office.
- The period covered is \_\_\_\_\_, through the date of leaving office.

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 9

- Schedule A-1 - Investments - schedule attached
- Schedule A-2 - Investments - schedule attached
- Schedule B - Real Property - schedule attached
- Schedule C - Income, Loans, & Business Positions - schedule attached
- Schedule D - Income - Gifts - schedule attached
- Schedule E - Income - Gifts - Travel Payments - schedule attached
- or-
- None - No reportable interests on any schedule

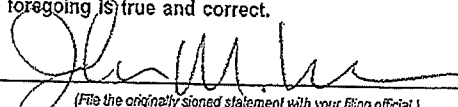
5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE  
 (Business or Agency Address Recommended - Public Document)  
 1 Letterman Drive, #C500 San Francisco CA 94129  
 DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS (OPTIONAL)  
 ( 415 ) \_\_\_\_\_ jpacunion.com

I have used \_\_\_\_\_ assistance 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.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 09/15/2013  
 (month, day, year)

Signature   
 (File the originally signed statement 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.

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name John M. Lee
--

▶ NAME OF BUSINESS ENTITY  
Time Warner Cable

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Cable

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
                                   Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
Bank of America

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Banking

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
                                   Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
Intel Corporation

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Computers

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
                                   Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
IBM

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Computers

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
                                   Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
Merck

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Pharmaceutical

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
                                   Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
Microsoft

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Computer

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
                                   Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 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 FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
John M. Lee

▶ NAME OF BUSINESS ENTITY  
Oracle Corporation

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Software

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_ / \_\_\_\_ / 12      \_\_\_\_ / \_\_\_\_ / 12  
 ACQUIRED                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
Qualcomm

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Computer

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_ / \_\_\_\_ / 12      \_\_\_\_ / \_\_\_\_ / 12  
 ACQUIRED                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
LSI Corporation

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Computers

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_ / \_\_\_\_ / 12      \_\_\_\_ / \_\_\_\_ / 12  
 ACQUIRED                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
Times Warner

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Entertainment

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_ / \_\_\_\_ / 12      12 / 20 / 12  
 ACQUIRED                  DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_ / \_\_\_\_ / 12      \_\_\_\_ / \_\_\_\_ / 12  
 ACQUIRED                  DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_ / \_\_\_\_ / 12      \_\_\_\_ / \_\_\_\_ / 12  
 ACQUIRED                  DISPOSED

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)

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

Name  
 John M. Lee

**1. BUSINESS ENTITY OR TRUST**

John M Lee and Lily T Lee Revocable Trust  
 Name

1 Letterman Drive, #C500, San Francisco, CA 94129  
 Address (Business Address Acceptable)

Check one  
 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                                      / / 12                      / / 12  
 \$2,000 - \$10,000                                      ACQUIRED                      DISPOSED  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

NATURE OF INVESTMENT  
 Partnership     Sole Proprietorship     Other

YOUR BUSINESS POSITION \_\_\_\_\_

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

\$0 - \$499                       \$10,001 - \$100,000  
 \$500 - \$1,000                       OVER \$100,000  
 \$1,001 - \$10,000

**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                       REAL PROPERTY

3609-045

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

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:

\$2,000 - \$10,000                                      / / 12                      / / 12  
 \$10,001 - \$100,000                                      ACQUIRED                      DISPOSED  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

NATURE OF INTEREST  
 Property Ownership/Deed of Trust     Stock     Partnership

Leasehold \_\_\_\_\_ Yrs. remaining     Other \_\_\_\_\_

Check box if additional schedules reporting investments or real property are attached

**1. BUSINESS ENTITY OR TRUST**

John M Lee and Lily T Lee Revocable Trust  
 Name

1 Letterman Drive, #C500, San Francisco, CA 94129  
 Address (Business Address Acceptable)

Check one  
 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                                      / / 12                      / / 12  
 \$2,000 - \$10,000                                      ACQUIRED                      DISPOSED  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

NATURE OF INVESTMENT  
 Partnership     Sole Proprietorship     Other

YOUR BUSINESS POSITION \_\_\_\_\_

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

\$0 - \$499                       \$10,001 - \$100,000  
 \$500 - \$1,000                       OVER \$100,000  
 \$1,001 - \$10,000

**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                       REAL PROPERTY

1649-012

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

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:

\$2,000 - \$10,000                                      / / 12                      / / 12  
 \$10,001 - \$100,000                                      ACQUIRED                      DISPOSED  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

NATURE OF INTEREST  
 Property Ownership/Deed of Trust     Stock     Partnership

Leasehold \_\_\_\_\_ Yrs. remaining     Other \_\_\_\_\_

Check box if additional schedules reporting investments or real property are attached

Comments: \_\_\_\_\_











**SCHEDULE E**  
**Income - Gifts**  
**Travel Payments, Advances,**  
**and Reimbursements**

<b>CALIFORNIA FORM 700</b> 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)

ADDRESS (Business Address Acceptable)  
 301 Grove Street

CITY AND STATE  
 San Francisco, CA 94102

BUSINESS ACTIVITY, IF ANY, OF SOURCE  501 (c)(3)  
 Real Estate Association

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): / / - / / AMT: \$  
 (if gift)

TYPE OF PAYMENT: (must check one)  Gift  Income

Made a Speech/Participated in a Panel

Other - Provide Description

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE  501 (c)(3)

DATE(S): / / - / / AMT: \$  
 (if gift)

TYPE OF PAYMENT: (must check one)  Gift  Income

Made a Speech/Participated in a Panel

Other - Provide Description

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE  501 (c)(3)

DATE(S): / / - / / AMT: \$  
 (if gift)

TYPE OF PAYMENT: (must check one)  Gift  Income

Made a Speech/Participated in a Panel

Other - Provide 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:** 01008573 - 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 Assessment Appeals Board

Application for Appointment to: Board 1 or Board 1 Alternate  
 (Please circle one) Board 2 or 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 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?  yes  no

Name: Eugene L. Valla Home Address: DARWIN WAY  
 City: SAN FRANCISCO State: CA Zip code: 94127-2522  
 Business Address: N/A City: N/A State: N/A Zip Code: N/A  
 Home Phone: 415 Work Phone: 415 399 8513 Fax #: 415 421 8669  
 Pager #: N/A E-Mail Address: @luniv.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 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 same seats.

Please state your qualifications: CALIFORNIA CPA; former memberships included ULI, BOMA, LANDA ALPHA AS WELL AS CIVIC AND CHARITABLE ORGANIZATIONS.

Please state your business and/or professional experience: FORTY YEARS WITH THE LURIE COMPANY DEALING WITH REAL ESTATE FINANCING, REQUISITIONS, DISPOSITIONS & PLANNING.

Occupation: RETIRED VOLUNTEER/INVESTOR/CONSULTANT Education: B.S. ACCOUNTING/FINANCE SJSU '67

Civic Activities: SERVICE & VOLUNTEERING AT NON-PROFITS (SCHOOLS, CBO'S)

Ethnicity (optional): Caucasian Sex (optional):  M  F

Other Personal Information (optional) SEE ATTACHED "BIO"

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? 2 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: August 22, 2013

Applicant's Signature: Eugene L. Valla

For Office Use Only: Appointed to Board #: \_\_\_\_\_ Seat #: \_\_\_\_\_ Term Expires: \_\_\_\_\_  
 Revised July 2013

## Bio for Gene Valla

Eugene L. Valla was born and raised in Watsonville, California. After graduating Watsonville High School in 1958, Gene enlisted in the U.S. Navy. He received his Honorable Discharge in August, 1962. In fall of 1962 he enrolled at Cabrillo Junior College; then, after completing studies there, transferred to and graduated from San Jose State in 1967 with a BS in Accounting and Finance.. He is a California Certified Public Accountant.

After graduation, Gene went to work for Lybrand, Ross Bros. & Montgomery in their Oakland, California office. Lybrand's as it was called, was, at the time, one of the Big-8 CPA firms in the country. Gene worked there from June 1966 until August 1969 and was a Senior Auditor.

His second employer, Systech Financial Corporation, was located in Walnut Creek, California. They were a garden-style apartment developer that, in addition to designing and constructing the apartment buildings, also formed the partnerships for ownership of the properties. The company also had a property management subsidiary. Gene served as Assistant Controller and worked there from August 1969 until October 1972.

In October 1972 Gene joined The Lurie Company as Controller. The Lurie Company was a privately-held, commercial real estate company with office buildings in the cities of San Francisco and Chicago as well as industrial properties located in communities nearby those two cities. Gene's responsibilities grew to Vice President and, later, to Executive Vice President. In 2003, Gene became President of the company. Gene was also a director of the company. Gene is also an officer and director of the Louis R. Lurie Foundation.

Gene and his wife, Suzanne, both work with and/or contribute to a number of youth oriented non-profit community based organizations and schools in San Francisco as well as in the Northern Sonoma County area.

Gene's civic and community involvement includes or has included the Bay Area Sports Hall of Fame, Lambda Alfa, AICPA, California Society of CPA's, ULI, BOMA PAC, and related real estate organizations. Memberships include The Olympic Club, the Bay Club, Park Point in Healdsburg and Pumpkin Ridge Golf Club near Portland, Oregon.

August, 2013

STATEMENT OF ECONOMIC INTERESTS  
 COVER PAGE

Date Received  
 Official Use Only

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
 Valla Eugene Leonard

**1. Office, Agency, or Court**

Agency Name  
 Assessment Appeals Board  
 Division, Board, Department, District, if applicable  
 Assessment Appeals Board  
 Your Position  
 Board No. 1

▶ If filing for multiple positions, list below or on an attachment.

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

**2. Jurisdiction of Office (Check at least one box)**

- State
- Multi-County \_\_\_\_\_
- City of \_\_\_\_\_
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of San Francisco
- Other \_\_\_\_\_

**3. Type of Statement (Check at least one box)**

- Annual: The period covered is January 1, 2012, through December 31, 2012.  
 -or-  
 The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2012.
- Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
 (Check one)
- The period covered is January 1, 2012, through the date of leaving office.
- Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_
- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.
- Candidate: Election year 2013 and office sought, if different than Part 1: \_\_\_\_\_

**4. Schedule Summary**

Check applicable schedules or "None."

▶ Total number of pages including this cover page: 3

- Schedule A-1 - Investments - schedule attached
- Schedule A-2 - Investments - schedule attached
- Schedule B - Real Property - schedule attached
- Schedule C - Income, Loans, & Business Positions - schedule attached
- Schedule D - Income - Gifts - schedule attached
- Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-  
 None - No reportable interests on any schedule

**5. Verification**

MAILING ADDRESS STREET CITY STATE ZIP CODE  
 (Business or Agency Address Recommended - Public Document)  
\_\_\_\_\_ arien Way San Francisco CA 94127  
 DAYTIME TELEPHONE NUMBER ( 415 ) \_\_\_\_\_  
 E-MAIL ADDRESS (OPTIONAL) \_\_\_\_\_ @urle.com

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.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 09/04/2013  
 (month, day, year)

Signature [Signature]  
 (File the originally signed statement 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 700**  
 FAIR POLITICAL PRACTICES COMMISSION  
 Name \_\_\_\_\_

▶ NAME OF BUSINESS ENTITY  
 Merrill Lynch

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
 E&S Valla Trust

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other Fixed Income  
(Describe)

Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
 ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)

Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
 ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
 Merrill Lynch

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
 IRA

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other Fixed Income  
(Describe)

Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
 ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)

Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
 ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)

Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
 ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)

Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
 ACQUIRED      DISPOSED

Comments: \_\_\_\_\_

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

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

Name \_\_\_\_\_

**▶ 1. BUSINESS ENTITY OR TRUST**

**PABLO 10422 LLC**

Name \_\_\_\_\_

San Francisco, CA

Address (Business Address Acceptable) \_\_\_\_\_

Check one

- Trust, go to 2     Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**  
 Rental real estate

<b>FAIR MARKET VALUE</b>	<b>IF APPLICABLE, LIST DATE:</b>
<input type="checkbox"/> \$0 - \$1,999	____/____/12    ____/____/12
<input type="checkbox"/> \$2,000 - \$10,000	ACQUIRED                      DISPOSED
<input type="checkbox"/> \$10,001 - \$100,000	
<input checked="" type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	

**NATURE OF INVESTMENT**  
 Partnership     Sole Proprietorship     LLC     Other \_\_\_\_\_

**YOUR BUSINESS POSITION** \_\_\_\_\_

**▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

- \$0 - \$499                       \$10,001 - \$100,000  
 \$500 - \$1,000                 OVER \$100,000  
 \$1,001 - \$10,000

**▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (with 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     REAL PROPERTY

**PABLO 10422 LLC**

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property  
**El Cerrito, CA**

Description of Business Activity or City or Other Precise Location of Real Property \_\_\_\_\_

<b>FAIR MARKET VALUE</b>	<b>IF APPLICABLE, LIST DATE:</b>
<input type="checkbox"/> \$2,000 - \$10,000	____/____/12    ____/____/12
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED                      DISPOSED
<input checked="" type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	

**NATURE OF INTEREST**  
 Property Ownership/Deed of Trust     Stock     Partnership

Leasehold \_\_\_\_\_     Other \_\_\_\_\_  
 Yrs. remaining \_\_\_\_\_

Check box if additional schedules reporting investments or real property are attached

**▶ 1. BUSINESS ENTITY OR TRUST**

Name \_\_\_\_\_

Address (Business Address Acceptable) \_\_\_\_\_

Check one

- Trust, go to 2     Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

<b>FAIR MARKET VALUE</b>	<b>IF APPLICABLE, LIST DATE:</b>
<input type="checkbox"/> \$0 - \$1,999	____/____/12    ____/____/12
<input type="checkbox"/> \$2,000 - \$10,000	ACQUIRED                      DISPOSED
<input type="checkbox"/> \$10,001 - \$100,000	
<input type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	

**NATURE OF INVESTMENT**  
 Partnership     Sole Proprietorship     Other \_\_\_\_\_

**YOUR BUSINESS POSITION** \_\_\_\_\_

**▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

- \$0 - \$499                       \$10,001 - \$100,000  
 \$500 - \$1,000                 OVER \$100,000  
 \$1,001 - \$10,000

**▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (with 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     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 \_\_\_\_\_

<b>FAIR MARKET VALUE</b>	<b>IF APPLICABLE, LIST DATE:</b>
<input type="checkbox"/> \$2,000 - \$10,000	____/____/12    ____/____/12
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED                      DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	

**NATURE OF INTEREST**  
 Property Ownership/Deed of Trust     Stock     Partnership

Leasehold \_\_\_\_\_     Other \_\_\_\_\_  
 Yrs. remaining \_\_\_\_\_

Check box if additional schedules reporting investments or real property are attached

Comments: \_\_\_\_\_





Department of Consumer Affairs  
California Board of Accountancy

# CALIFORNIA BOARD OF ACCOUNTANCY

**Licensee Name:** EUGENE LEONARD VALLA  
**License Type:** Certified Public Accountant  
**License Number:** 14901  
**License Status:** INACTIVE Definition  
**Experience Completed:** A Definition  
**Expiration Date:** April 30, 2014  
**Issue Date:** October 24, 1969  
**Address:** JARIEN WAY  
**City:** SAN FRANCISCO  
**State:** CA  
**Zip:** 94127-2522  
**County:** SAN FRANCISCO

**Status Definition – Inactive**  
 An inactive license is current; however, the licensee is not required to meet the continuing education requirements and they may not engage in the practice of public accountancy.

**Disciplinary Actions/License Restrictions:** No

No records returned

This information is updated Monday through Friday - Last updated: OCT-01-2013

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[Back](#)

**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: Board 1 or Board 1 Alternate  
 (Please circle one) Board 2 or 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 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?  yes  no

Name: JEFFREY J. MORRIS Home Address: JEFFERSON STREET

City: SAN FRANCISCO State: CA. Zip code: 94123

Business Address: (SAME) City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: 415 Work Phone: 415 606-9580 Fax #: 415 929-9511

Pager #: \_\_\_\_\_ E-Mail Address: @SBCGLOBAL.NET

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 same seats.

Please state your qualifications: CURRENT MEMBER OF ARB ONE SINCE 9-7-2009. MEMBER APPRAISAL INSTITUTE (MAI); CAL. REAL ESTATE BROKER.

Please state your business and/or professional experience: 35 YEARS REAL ESTATE EXECUTIVE, ADVISOR, APPRAISER, BROKER AND PROPERTY MANAGER.

Occupation: INVESTOR Education: BA STANFORD UNIVERSITY

Civic Activities: SAN FRANCISCO ZOO. SOCIETY, AOT, COMMONWEALTH CLUB, OLYMPIC CLUB.

Ethnicity (optional): CAUCASIAN Sex (optional):  M  F

Other Personal Information (optional) SEE ATTACHED COVER LETTER AND RESUME

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? 2 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: AUGUST 7 2013 Applicant's Signature: [Signature]

For Office Use Only: Appointed to Board #: \_\_\_\_\_ Seat #: \_\_\_\_\_ Term Expires: \_\_\_\_\_

# JJM ASSOCIATES

August 1, 2013

Rules Committee of the Board of Supervisors  
C/O Assessment Appeals Board Administrator  
City Hall, Room 405  
San Francisco CA 94102

Attention: Supervisors Yee, Breed and Cohen

## **RE: Reappointment to the Assessment Appeals Board**

Dear Supervisors

I have served on Board 1 of the Assessment Appeals Board since September 6, 2007. I seek your reappointment recommendation for a new three year term to the full Board of Supervisors. I am well qualified to continue in this position for the following reasons.

- I have read, assimilated and follow all relevant guidelines and laws from the State Board of Equalization, Revenue and Taxation Code Sections and Assessment Appeals Manual.
- Applied my over 35 years of institutional investment real estate management experience to determine equitable valuation for assessment purposes.
- Worked very professionally in a Board 1 leadership role with the AAB Administrator Dawn Duran and her staff, Board City Attorney Marie Blitz, Assessor Carmen Chu's office, and commercial property owners and their legal and appraisal representatives.
- Have the support of Administrator Duran and fellow Board 1 members to be reappointed.
- Have more than the requisite qualifications to serve, as outlined on the attached Application and Resume, including: licensed real estate broker, member of the Appraisal Institute (MAI) and the above mentioned 35 years of sophisticated investment real estate advisory, valuation, financing and acquisition experience.

Therefore, I would very much appreciate your support in my reappointment to Board 1 of the Assessment Appeals Board. I will be present and available for any questions at your upcoming meeting of the Rules Committee. Thank you for your consideration.

Sincerely yours,

  
Jeffrey J. Morris

Jefferson Street San Francisco, CA 94123 T: (415) 606-9580 F: (415) 606-9511  
929-9511 W: [@sbglobal.net](mailto:jjm@sbglobal.net)

## Resume of Jeffrey J. Morris

### *Qualifications*

California State Real Estate Broker License (No. 00397435) [retired]  
Member Appraisal Institute [MAI] (No.149594) [retired]  
Professional Experience: 35 year career in national investment real estate advisory, portfolio-property management, transaction, financing and valuation

### *Business/Professional Experience*

March, 2007-- *JJM Associates*, San Francisco  
Independent real estate consulting and investment  
1981-Feb. 2007 *BlackRock Realty*, San Francisco (and predecessor firms)  
Director-Portfolio Manager of Apartment Value Funds: over \$900 million in U.S. apartment investments.  
1991-1999 Managing Director, Metric Property Management:  
\$2.5 billion national portfolio of multi family, office,  
industrial and retail properties.  
1981-1990 Vice President/Senior Vice President of Portfolio  
Management.  
1971-1980 *Coldwell Banker Management Corporation*, San Francisco  
Vice President, Appraisal- Consultation Service

### **Education**

BA Political Science Stanford University, 1967

### **Civic-Charitable Activities:**

2007— Member, Assessment Appeals Board, City and County of  
San Francisco [three year term]  
1989-2001 Board of Directors, *Golden Gate Park Stables, Inc.*  
[Concession with the San Francisco City Recreation and Park  
Department]  
*Current* Marina Community Association; San Francisco  
Zoological Society; California Academy of Sciences; American  
Conservatory Theatre (ACT); Olympic Club Foundation

— Jefferson Street, San Francisco CA 94123

— [dsbcglobal.net](mailto:dsbcglobal.net)

V 415 606-9580

F 415 929-9511

**STATEMENT OF ECONOMIC INTERESTS**  
**COVER PAGE**

Date Received  
 Official Use Only

RECEIVED  
 BOARD OF SUPERVISORS  
 SAN FRANCISCO

Please type or print in ink.

NAME OF FILER (LAST) MORRIS (FIRST) JEFFREY (MIDDLE) JONATHAN

**1. Office, Agency, or Court**

Agency Name: ASSESSMENT APPEAL BOARD  
 Division, Board, Department, District, if applicable: SAN FRANCISCO CITY & COUNTY  
 Your Position: MEMBER

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

FILED  
 13 APR - 1 PM 4:58  
 CLERK COMMISSION

**2. Jurisdiction of Office (Check at least one box)**

- State
- Multi-County \_\_\_\_\_
- City of \_\_\_\_\_
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of SAN FRANCISCO
- Other \_\_\_\_\_

**3. Type of Statement (Check at least one box)**

- Annual: The period covered is January 1, 2012, through December 31, 2012.
- or-
- The period covered is \_\_\_\_\_ through December 31, 2012.
- Assuming Office: Date assumed \_\_\_\_\_
- Candidate: Election year \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_
- Leaving Office: Date Left \_\_\_\_\_ (Check one)
- The period covered is January 1, 2012, through the date of leaving office.
- The period covered is \_\_\_\_\_ through the date of leaving office.

**4. Schedule Summary**

- Check applicable schedules or "None."
- Schedule A-1 - Investments - schedule attached
  - Schedule A-2 - Investments - schedule attached
  - Schedule B - Real Property - schedule attached
  - Schedule C - Income, Loans, & Business Positions - schedule attached
  - Schedule D - Income - Gifts - schedule attached
  - Schedule E - Income - Gifts - Travel Payments - schedule attached
  - None - No reportable interests on any schedule
- Total number of pages including this cover page: 15

**5. Verification**

MAILING ADDRESS: JEFFERSON ST. SAN FRANCISCO CA 94123  
(Business or Agency Address Recommended - Public Document)

DAYTIME TELEPHONE NUMBER: (415) 606-9580  
 EMAIL ADDRESS (OPTIONAL): \_\_\_\_\_

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.  
 I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed: 3.20.13 (month, day, year)  
 Signature: [Handwritten Signature]

opape



**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  
JEFFREY J. MORRIS

▶ NAME OF BUSINESS ENTITY  
COCA COLA

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
CONSUMER STAPLES

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)

Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
EXXON

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
ENERGY

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)

Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
COMCAST

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
TECHNOLOGY

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)

Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
GENERAL ELECTRIC

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
INDUSTRIAL

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)

Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
WALT DISNEY CO

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
CONSUMER DISCRETIONARY

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)

Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
GRAXCO SMITH KING

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
HEALTH CARE

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)

Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 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 FORM 700  
FAIR POLITICAL PRACTICES COMMISSION

Name  
JEFFREY J. MORRIS

NAME OF BUSINESS ENTITY  
GOOGLE

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
INFO TECH

FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

NATURE OF INVESTMENT  
 Stock     Other \_\_\_\_\_  
(Describe)

Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12    \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                      DISPOSED

NAME OF BUSINESS ENTITY  
HSBC HOLDINGS

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
FINANCIALS

FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

NATURE OF INVESTMENT  
 Stock     Other \_\_\_\_\_  
(Describe)

Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12    \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                      DISPOSED

NAME OF BUSINESS ENTITY  
HOME DEPOT

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
CONSUMER DISCRETIONARY

FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

NATURE OF INVESTMENT  
 Stock     Other \_\_\_\_\_  
(Describe)

Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12    \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                      DISPOSED

NAME OF BUSINESS ENTITY  
IBM

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
INFO TECH

FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

NATURE OF INVESTMENT  
 Stock     Other \_\_\_\_\_  
(Describe)

Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12    \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                      DISPOSED

NAME OF BUSINESS ENTITY  
INTELCORP

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
INFO TECH

FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

NATURE OF INVESTMENT  
 Stock     Other \_\_\_\_\_  
(Describe)

Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12    \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                      DISPOSED

NAME OF BUSINESS ENTITY  
JOHNSON JOHNSON

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
HEALTH CARE

FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

NATURE OF INVESTMENT  
 Stock     Other \_\_\_\_\_  
(Describe)

Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12    \_\_\_\_\_ / \_\_\_\_\_ / 12  
 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 FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION  
Name: JEFFREY J. MORRIS

▶ NAME OF BUSINESS ENTITY  
J.P. MORGAN CHASE  
GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
FINANCIALS  
FAIR MARKET VALUE  
 \$2,000 - \$10,000  \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  Over \$1,000,000  
NATURE OF INVESTMENT  
 Stock  Other \_\_\_\_\_ (Describe)  
 Partnership  Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)  
IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12 ACQUIRED      \_\_\_\_/\_\_\_\_/12 DISPOSED

▶ NAME OF BUSINESS ENTITY  
NOVARTIS  
GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
HEALTH CARE  
FAIR MARKET VALUE  
 \$2,000 - \$10,000  \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  Over \$1,000,000  
NATURE OF INVESTMENT  
 Stock  Other \_\_\_\_\_ (Describe)  
 Partnership  Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)  
IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12 ACQUIRED      \_\_\_\_/\_\_\_\_/12 DISPOSED

▶ NAME OF BUSINESS ENTITY  
MICROSOFT  
GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
INFO TECH  
FAIR MARKET VALUE  
 \$2,000 - \$10,000  \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  Over \$1,000,000  
NATURE OF INVESTMENT  
 Stock  Other \_\_\_\_\_ (Describe)  
 Partnership  Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)  
IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12 ACQUIRED      \_\_\_\_/\_\_\_\_/12 DISPOSED

▶ NAME OF BUSINESS ENTITY  
ORACLE  
GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
INFO TECH  
FAIR MARKET VALUE  
 \$2,000 - \$10,000  \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  Over \$1,000,000  
NATURE OF INVESTMENT  
 Stock  Other \_\_\_\_\_ (Describe)  
 Partnership  Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)  
IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12 ACQUIRED      \_\_\_\_/\_\_\_\_/12 DISPOSED

▶ NAME OF BUSINESS ENTITY  
NESTLE  
GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
CONSUMER STAPLES  
FAIR MARKET VALUE  
 \$2,000 - \$10,000  \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  Over \$1,000,000  
NATURE OF INVESTMENT  
 Stock  Other \_\_\_\_\_ (Describe)  
 Partnership  Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)  
IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12 ACQUIRED      \_\_\_\_/\_\_\_\_/12 DISPOSED

▶ NAME OF BUSINESS ENTITY  
PEPSICO  
GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
CONSUMER STAPLES  
FAIR MARKET VALUE  
 \$2,000 - \$10,000  \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  Over \$1,000,000  
NATURE OF INVESTMENT  
 Stock  Other \_\_\_\_\_ (Describe)  
 Partnership  Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)  
IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12 ACQUIRED      \_\_\_\_/\_\_\_\_/12 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 FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION  
Name  
JEFFREY J. MORRIS

▶ NAME OF BUSINESS ENTITY  
PFIZER

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
HEALTH CARE

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
SARICOM

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
INFO TECH

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
PHILIP MORRIS

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
CONSUMER STAPLES

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
ROYAL BANK OF CANADA

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
FINANCIALS

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
PROCTOR GAMBLE

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
CONSUMER STAPLES

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
SAP AG

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
INFO TECH

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 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 FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
JEFFREY J. MORRIS

NAME OF BUSINESS ENTITY  
SCHLUMBERGER LTD

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
ENERGY

FAIR MARKET VALUE  
 \$2,000 - \$10,000      \$10,001 - \$100,000  
 \$100,001 - \$1,000,000      Over \$1,000,000

NATURE OF INVESTMENT  
 Stock      Other \_\_\_\_\_ (Describe)  
 Partnership      Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12     \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED     DISPOSED

NAME OF BUSINESS ENTITY  
USA INC

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
FINANCIALS

FAIR MARKET VALUE  
 \$2,000 - \$10,000      \$10,001 - \$100,000  
 \$100,001 - \$1,000,000      Over \$1,000,000

NATURE OF INVESTMENT  
 Stock      Other \_\_\_\_\_ (Describe)  
 Partnership      Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12     \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED     DISPOSED

NAME OF BUSINESS ENTITY  
TOYOTA

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
CONSUMER DISCRETIONARY

FAIR MARKET VALUE  
 \$2,000 - \$10,000      \$10,001 - \$100,000  
 \$100,001 - \$1,000,000      Over \$1,000,000

NATURE OF INVESTMENT  
 Stock      Other \_\_\_\_\_ (Describe)  
 Partnership      Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12     \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED     DISPOSED

NAME OF BUSINESS ENTITY  
WELLS FARGO CO

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
FINANCIALS

FAIR MARKET VALUE  
 \$2,000 - \$10,000      \$10,001 - \$100,000  
 \$100,001 - \$1,000,000      Over \$1,000,000

NATURE OF INVESTMENT  
 Stock      Other \_\_\_\_\_ (Describe)  
 Partnership      Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12     \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED     DISPOSED

NAME OF BUSINESS ENTITY  
UNITED TECHNOLOGY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
INDUSTRIALS

FAIR MARKET VALUE  
 \$2,000 - \$10,000      \$10,001 - \$100,000  
 \$100,001 - \$1,000,000      Over \$1,000,000

NATURE OF INVESTMENT  
 Stock      Other \_\_\_\_\_ (Describe)  
 Partnership      Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12     \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED     DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
 \$2,000 - \$10,000      \$10,001 - \$100,000  
 \$100,001 - \$1,000,000      Over \$1,000,000

NATURE OF INVESTMENT  
 Stock      Other \_\_\_\_\_ (Describe)  
 Partnership      Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12     \_\_\_\_\_ / \_\_\_\_\_ / 12  
 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 FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION  
Name  
JEFFREY J. MORRIS

NAME OF BUSINESS ENTITY  
BANK OF SCOTIA

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
FINANCIAL SERVICES

FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

NATURE OF INVESTMENT  
 Stock     Other BONDS  
(Describe)

Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12    \_\_\_\_/\_\_\_\_/12  
ACQUIRED    DISPOSED

NAME OF BUSINESS ENTITY  
AMGEN

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
HEALTH CARE

FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

NATURE OF INVESTMENT  
 Stock     Other  
(Describe)

Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12    \_\_\_\_/\_\_\_\_/12  
ACQUIRED    DISPOSED

NAME OF BUSINESS ENTITY  
PRAXAIR

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
INDUSTRIALS

FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

NATURE OF INVESTMENT  
 Stock     Other BONDS  
(Describe)

Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12    \_\_\_\_/\_\_\_\_/12  
ACQUIRED    DISPOSED

NAME OF BUSINESS ENTITY  
BBBT CORP

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

NATURE OF INVESTMENT  
 Stock     Other  
(Describe)

Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12    \_\_\_\_/\_\_\_\_/12  
ACQUIRED    DISPOSED

NAME OF BUSINESS ENTITY  
ABBOTT LABS

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
INDUSTRIALS

FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

NATURE OF INVESTMENT  
 Stock     Other  
(Describe)

Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12    \_\_\_\_/\_\_\_\_/12  
ACQUIRED    DISPOSED

NAME OF BUSINESS ENTITY  
BNP BILLTON LTD

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
FINANCIALS

FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

NATURE OF INVESTMENT  
 Stock     Other  
(Describe)

Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12    \_\_\_\_/\_\_\_\_/12  
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.

<p><b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION</p> <p>Name <u>JEFFREY J. MORRIS</u></p>
--

▶ NAME OF BUSINESS ENTITY  
BLACKROCK INC

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
FINANCIALS

FAIR MARKET VALUE  
 \$2,000 - \$10,000      \$10,001 - \$100,000  
 \$100,001 - \$1,000,000      Over \$1,000,000

NATURE OF INVESTMENT  
 Stock      Other \_\_\_\_\_ (Describe)  
 Partnership      Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12     \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
COSTCO INC

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
CONSUMER

FAIR MARKET VALUE  
 \$2,000 - \$10,000      \$10,001 - \$100,000  
 \$100,001 - \$1,000,000      Over \$1,000,000

NATURE OF INVESTMENT  
 Stock      Other \_\_\_\_\_ (Describe)  
 Partnership      Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12     \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
CHEVRON

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
ENERGY

FAIR MARKET VALUE  
 \$2,000 - \$10,000      \$10,001 - \$100,000  
 \$100,001 - \$1,000,000      Over \$1,000,000

NATURE OF INVESTMENT  
 Stock      Other \_\_\_\_\_ (Describe)  
 Partnership      Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12     \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
WALT DISNEY CO

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
 \$2,000 - \$10,000      \$10,001 - \$100,000  
 \$100,001 - \$1,000,000      Over \$1,000,000

NATURE OF INVESTMENT  
 Stock      Other \_\_\_\_\_ (Describe)  
 Partnership      Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12     \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
CORCH INC

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
CONSUMER DISCRETIONARY

FAIR MARKET VALUE  
 \$2,000 - \$10,000      \$10,001 - \$100,000  
 \$100,001 - \$1,000,000      Over \$1,000,000

NATURE OF INVESTMENT  
 Stock      Other \_\_\_\_\_ (Describe)  
 Partnership      Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12     \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
ECOLAB INC

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
SCIENCE

FAIR MARKET VALUE  
 \$2,000 - \$10,000      \$10,001 - \$100,000  
 \$100,001 - \$1,000,000      Over \$1,000,000

NATURE OF INVESTMENT  
 Stock      Other \_\_\_\_\_ (Describe)  
 Partnership      Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12     \_\_\_\_\_ / \_\_\_\_\_ / 12  
 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 FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION  
Name  
JEFFREY J. MORRIS

NAME OF BUSINESS ENTITY  
EMERSON ELECTRIC

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
IND

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
ECON SERVICE CORP.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
IND

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
EXPRESS SCRIPTS HEDGE

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
SCIENCE

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
FRESHPORT MCMORAN COPPER

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
INDS

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
FEDEX

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
TRANSPORTATION

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
GE

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
IND

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 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 FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

Name  
JEFFREY J. MORRIS

▶ NAME OF BUSINESS ENTITY  
MC DONALDS

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
FOOD

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
                                   Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
NESTLE

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
FOOD

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
                                   Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
MERCK

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
HERCUL CARE

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
                                   Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
NEXTERA ENERGY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
ENERGY

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
                                   Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
MICROSOFT

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
INFO TECH

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
                                   Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
NIKE INC

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
CONSUMER

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
                                   Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 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.

**GALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
JEFFREY J. MORRIS

▶ NAME OF BUSINESS ENTITY  
ROYAL DUTCH SHELL

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
ENERGY

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)

Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
VERIZON

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
TELECOMMUNICATION

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)

Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
SAP AG

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
TECH

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)

Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
VISA

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
FINANCIALS

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)

Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
UNITED TECH

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
INDUSTRIALS

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)

Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
WELLS FARGO

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
FINANCIALS

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)

Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 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 FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION  
 Name  
JEFFREY J. MORRIS

NAME OF BUSINESS ENTITY  
WILLIAMS COMPANIES  
 GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
 \_\_\_\_\_  
 \_\_\_\_\_  
 FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000  
 NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income Received of \$0 - \$499  
     Income Received of \$500 or More (Report on Schedule C)  
 IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                      DISPOSED

NAME OF BUSINESS ENTITY  
 \_\_\_\_\_  
 GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
 \_\_\_\_\_  
 \_\_\_\_\_  
 FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000  
 NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income Received of \$0 - \$499  
     Income Received of \$500 or More (Report on Schedule C)  
 IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                      DISPOSED

NAME OF BUSINESS ENTITY  
3 M COMPANY  
 GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
INDUSTRIALS  
 \_\_\_\_\_  
 \_\_\_\_\_  
 FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000  
 NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income Received of \$0 - \$499  
     Income Received of \$500 or More (Report on Schedule C)  
 IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                      DISPOSED

NAME OF BUSINESS ENTITY  
 \_\_\_\_\_  
 GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
 \_\_\_\_\_  
 \_\_\_\_\_  
 FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000  
 NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income Received of \$0 - \$499  
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 IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                      DISPOSED

NAME OF BUSINESS ENTITY  
 \_\_\_\_\_  
 GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
 \_\_\_\_\_  
 \_\_\_\_\_  
 FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
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 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
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NAME OF BUSINESS ENTITY  
 \_\_\_\_\_  
 GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
 \_\_\_\_\_  
 \_\_\_\_\_  
 FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
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 NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income Received of \$0 - \$499  
     Income Received of \$500 or More (Report on Schedule C)  
 IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                                      DISPOSED

Comments: \_\_\_\_\_



**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: Assessment Appeals Board

Seat # or Category (If applicable): N.A. Boards 1-3 (all seats) District: \_\_\_\_\_

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: \_\_\_\_\_@gmail.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 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.

**Business and/or professional experience:**

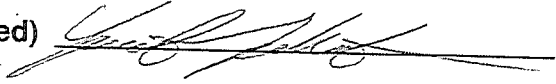
I have worked in the following capacities: attorney, property manager, tax accountant, and paralegal.

**Civic Activities:**

I volunteered for Mayor Gavin Newsom and Supervisor Michela Alioto-Pier. I have also enjoyed volunteering at the Shelter Network and Home Away from Homelessness.

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: 10.25.2013 Applicant's Signature: (required) 

**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: \_\_\_\_\_

YOSEF TAHBAZOF

TAHBAZOF LAW FIRM, LLP

1256 Howard Street • San Francisco, CA 94103 • (415) 922-0200 x 111 • yosef@tahbazoflaw.com

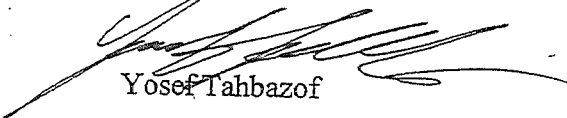
September 9, 2013

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

## 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 August 2011 - Present  
*Partner*

- 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 August 2011 - Present  
*Manager*

- 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 May 2010 – August 2010  
*Intern*

- 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. 1**

**Contact and Address:**

Dawn Duran  
Assessment Appeals Board  
City Hall, Room 405  
San Francisco, CA 94102

Phone: (415) 554-6778

Fax: (415) 554-6775

Email: Dawn.Duran@sfgov.org

**Authority:**

Administrative Code Chapter 2B et seq.; 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. 1 consists of eight members, five regular members, and three alternate members all appointed by the Board of Supervisors. The regular members of Assessment Appeals Board No. 1 shall serve ex officio as the regular members of Assessment Appeals Board No. 3 concurrent with their service on Assessment Appeals Board No. 1.

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 Appraisers; or he or she is a current member of an assessment appeals board.

"R Board Description" (Screen Print)



San Francisco  
BOARD OF SUPERVISORS

**Hearing Officers:** The regular and alternate members of the Board shall also serve as hearing 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. 1; (c) the regular 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 and Assessment Appeals Board 1 shall have jurisdiction to hear applications for reduction affecting any property on the secured or unsecured rolls without limitation.

**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