

File No. 150930

Committee Item No. 6

Board Item No. 13

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Rules Committee

Date September 24, 2015

Board of Supervisors Meeting

Date October 4, 2015

Cmte Board

- | | | |
|-------------------------------------|-------------------------------------|--|
| <input type="checkbox"/> | <input checked="" 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"/> | Memorandum of Understanding (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 checked="" type="checkbox"/> | Application |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Form 700 |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Vacancy Notice |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Information Sheet |
| <input type="checkbox"/> | <input type="checkbox"/> | Public Correspondence |

OTHER (Use back side if additional space is needed)

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

Completed by: Alisa Somera

Date September 18, 2015

Completed by: Alisa Somera

Date October 1, 2015

1 [Appointments, Assessment Appeals Board No. 2 - Louisa Mendoza, Daniel Hershkowitz,
2 Joyce Lewis, and Angela Cheung]

3 **Motion appointing Louisa Mendoza, Daniel Hershkowitz, Joyce Lewis, and Angela**
4 **Cheung, terms ending September 3, 2018, to the Assessment Appeals Board No. 2.**

5
6 MOVED, That the Board of Supervisors of the City and County of San Francisco does
7 hereby appoint the hereinafter designated persons to serve as members of the Assessment
8 Appeals Board No. 2, pursuant to the provisions of California Revenue and Taxation Code,
9 Section 1620 et seq., and San Francisco Administrative Code, Section 2B.1 et seq., for the
10 terms specified:

11 Louisa Mendoza, seat 1, succeeding herself, term expired, must have a minimum of
12 five years professional experience in the State of California as one of the following: certified
13 public accountant or public accountant; licensed real estate broker; attorney; or a property
14 appraiser accredited by a nationally recognized professional organization, certified by the
15 Office of Real Estate Appraisers, or certified by the State Board of Equalization, for the
16 unexpired portion of a three-year term ending September 3, 2018.

17 Daniel Hershkowitz, seat 5, succeeding himself, term expired, must have a minimum of
18 five years professional experience in the State of California as one of the following: certified
19 public accountant or public accountant; licensed real estate broker; attorney; or a property
20 appraiser accredited by a nationally recognized professional organization, certified by the
21 Office of Real Estate Appraisers, or certified by the State Board of Equalization, for the
22 unexpired portion of a three-year term ending September 3, 2018.

23 Joyce Lewis, seat 6 (Alternate Member), succeeding herself, term expired, must have a
24 minimum of five years professional experience in the State of California as one of the
25 following: certified public accountant or public accountant; licensed real estate broker;

1 attorney; or a property appraiser accredited by a nationally recognized professional
2 organization, certified by the Office of Real Estate Appraisers, or certified by the State Board
3 of Equalization, for the unexpired portion of a three-year term ending September 3, 2018.

4 Angela Cheung, seat 7 (Alternate Member), succeeding Diana Daniel, term expired,
5 must have a minimum of five years professional experience in the State of California as one of
6 the following: certified public accountant or public accountant; licensed real estate broker;
7 attorney; or a property appraiser accredited by a nationally recognized professional
8 organization, certified by the Office of Real Estate Appraisers, or certified by the State Board
9 of Equalization, for the unexpired portion of a three-year term ending September 3, 2018.

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 |
| <u>Board 2</u> | or | <u>Board 2 Alternate</u> |
| 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: LOUISA WENDOZA Home Address: MINNESOTA ST

City: SAN FRANCISCO CA State: CA Zip code: 94107

Business Address: 980 MINNESOTA ST #1 City: SAN FRAN State: CA Zip Code: 94107

Home Phone: 415 Work Phone: 415 824 3514 Fax #: 415 824 3618

Pager #: _____ E-Mail Address: lmmfin1@

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: REAL ESTATE BROKER / MORTGAGE BROKER
PROPERTY MANAGER

Please state your business and/or professional experience: PRACTICING REAL ESTATE BROKER
FOR 17 YRS IN COMMERCIAL MIX USE + RESIDENTIAL PROPERTIES / LOAN BROKERAGE

Occupation: REAL ESTATE BROKER Education: BS FINANCE

Civic Activities: BOARD OF REALTOR

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

Other Personal Information (optional) _____

Would you be able to attend Day Meetings? Yes No Evening meetings? Yes No

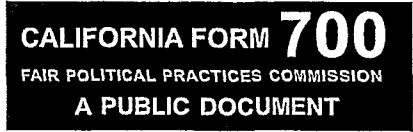
How many days a week would you be available for hearings? 5 How many evenings a week? 3

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: 8/20/2015 Applicant's Signature: _____

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



STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

Date Initial Filing Received Official Use Only

E-Filed 03/30/2015 18:33:32

Filing ID: 154836833

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE) Mendoza, Louisa

1. Office, Agency, or Court

Agency Name (Do not use acronyms) City and County of San Francisco Division, Board, Department, District, if applicable Assessment Appeals Board Your Position Member

If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

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, 2014, through December 31, 2014 -or- The period covered is through December 31, 2014 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, 2014, 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: 4 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

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE (Business or Agency Address Recommended - Public Document) San Francisco CA 94107 DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS

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 03/30/2015 Signature Louisa Mendoza (month, day, year) (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 _____
Mendoza, Louisa

▶ NAME OF BUSINESS ENTITY
Fidelity Mutual Funds

GENERAL DESCRIPTION OF THIS BUSINESS
Investments

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:
 _____ / _____ / _____ _____ / _____ / _____
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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:
 _____ / _____ / _____ _____ / _____ / _____
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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:
 _____ / _____ / _____ _____ / _____ / _____
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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:
 _____ / _____ / _____ _____ / _____ / _____
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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:
 _____ / _____ / _____ _____ / _____ / _____
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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:
 _____ / _____ / _____ _____ / _____ / _____
 ACQUIRED DISPOSED

Comments: _____

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION
 Name _____
 Mendoza, Louisa

SCHEDULE B
Interests in Real Property
 (Including Rental Income)

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
88 Orsi Circle
 CITY
San Francisco
 FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000
 ACQUIRED _____ DISPOSED _____
 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
139 Valmar St.
 CITY
San Francisco
 FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000
 ACQUIRED _____ DISPOSED _____
 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 C

Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name _____

Mendoza, Louisa

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
M & M Financial Services

ADDRESS (Business Address Acceptable)
San Francisco, Ca 94107

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Financial Management

YOUR BUSINESS POSITION
Broker

GROSS INCOME RECEIVED
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
 Salary Spouse's or registered domestic partner's income
(For self-employed use Schedule A-2.)
 Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
 Sale of _____
(Real property, car, boat, etc.)
 Loan repayment
 Commission or Rental Income, list each source of \$10,000 or more

(Describe)
 Other _____
(Describe)

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
 Salary Spouse's or registered domestic partner's income
(For self-employed use Schedule A-2.)
 Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
 Sale of _____
(Real property, car, boat, etc.)
 Loan repayment
 Commission or Rental Income, list each source of \$10,000 or more

(Describe)
 Other _____
(Describe)

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, 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 _____

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

INTEREST RATE _____ % None

TERM (Months/Years) _____

SECURITY FOR LOAN
 None Personal residence
 Real Property _____
Street address

City
 Guarantor _____
 Other _____
(Describe)

Comments: _____

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: Daniel Herszkowitz Home Address: 1 Vale Ave

City: SF State: CA Zip code: 94132

Business Address: _____ City: _____ State: _____ Zip Code: _____

Home Phone: cell 415 _____ Phone: _____ Fax #: _____

Pager #: _____ E-Mail Address: MRDANTASTIC@G _____

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: #2 ~~#3~~ (incumbent as regular Board 2)

Please state your business and/or professional experience: _____

Occupation: BROKER/LAWYER Education: BS J.D.

Civic Activities: YES

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

Other Personal Information (optional) _____

Would you be able to attend Day Meetings? Yes No Evening meetings? Yes No

How many days a week would you be available for hearings? _____ How many evenings a week? _____

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: 8/11/15 Applicant's Signature: [Signature]

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

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION
 A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

 Date Initial Filing
 Received
 Official Use Only

 E-Filed
 03/04/2015
 13:58:04

 Filing ID:
 154402139

Please type or print in ink.

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

Hershkowitz, Daniel

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City and County of San Francisco

Division, Board, Department, District, if applicable

Your Position

Assessment Appeals Board

Member

▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box) State Judge or Court Commissioner (Statewide Jurisdiction) Multi-County _____ County of San Francisco City of _____ Other _____**3. Type of Statement (Check at least one box)** Annual: The period covered is January 1, 2014, through December 31, 2014 Leaving Office: Date Left ____/____/____
(Check one)

-or-

The period covered is ____/____/____, through December 31, 2014

 The period covered is January 1, 2014, through the date of leaving office. Assuming Office: Date assumed ____/____/____ The period covered is ____/____/____, through the date of leaving office. 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: 2 Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-2 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule B - Real Property - schedule 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)

San Francisco CA 94132

DAYTIME TELEPHONE NUMBER

E-MAIL ADDRESS

()

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 03/04/2015
(month, day, year)Signature Daniel Hershkowitz
(File the originally signed statement with your filing official.)

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

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name
Hershkowitz, Daniel

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Real estate commissions -- real estate broker.
Independent Contractor.

ADDRESS (Business Address Acceptable)
San Francisco, Ca 94132

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Real estate commissions

YOUR BUSINESS POSITION
Independent contractor - realtor

GROSS INCOME RECEIVED
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
 Salary Spouse's or registered domestic partner's income
 (For self-employed use Schedule A-2.)
 Partnership (Less than 10% ownership. For 10% or greater use
 Schedule A-2.)
 Sale of _____
 (Real property, car, boat, etc.)
 Loan repayment
 Commission or Rental Income, list each source of \$10,000 or more

 (Describe)
 Other Real estate commissions - realtor
 (Describe)

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Real estate commission. Independent contractor.

ADDRESS (Business Address Acceptable)
San Francisco, Ca 94132

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Realtor. Commissions

YOUR BUSINESS POSITION
Realtor.

GROSS INCOME RECEIVED
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
 Salary Spouse's or registered domestic partner's income
 (For self-employed use Schedule A-2.)
 Partnership (Less than 10% ownership. For 10% or greater use
 Schedule A-2.)
 Sale of _____
 (Real property, car, boat, etc.)
 Loan repayment
 Commission or Rental Income, list each source of \$10,000 or more

 (Describe)
 Other Real estate commission.
 (Describe)

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, 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 _____

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

INTEREST RATE _____% None

TERM (Months/Years) _____

SECURITY FOR LOAN
 None Personal residence
 Real Property _____
 Street address _____
 City _____
 Guarantor _____
 Other _____
 (Describe)

Comments: _____

Somera, Alisa (BOS)

From: Daniel A. Hershkowitz <mrkantastic@yahoo.com>
Sent: Monday, September 21, 2015 1:14 PM
To: Somera, Alisa (BOS)
Subject: Re: Response Requested: Assessment Appeals Board No. 2

Please pass on this message to the Supervisors and/or their assistants.

COMMISSIONER DANIEL HERSHKOWITZ - ASSESSMENT APPEALS BOARD

I apologize to the Supervisors and to the committee for my inability to attend the hearing. I just recently made aware of the Thursday hearing -- however, I had already made vacation plans with my family. I mean no disrespect, and thank you for your understanding.

By way of this letter, I wish to express my desire to continue as a Commission for the Assessment Appeals Board. I formally request that you reappoint me to another term -- if you feel my qualifications so merit another term. Below is a brief outline of my relevant qualifications -- in addition to my current experience as a sitting Commissioner.

By education and training, I am a real estate attorney and real estate broker. From 1994-2001 I worked tirelessly to defend real estate brokerage firms against a wide variety of consumer lawsuits. Dissatisfied and unfulfilled, I quit the practice of law. In 2002-2003 I opened my own real estate brokerage and consulting firm -- Scholarship Homes & Real Estate. One of the prime motivations for opening my own brokerage was a desire to help "build community" and to share with our many community partners the fruits of my labors. For nearly 10-years I owned and directed my boutique real estate brokerage and consulting firm, and along the way engaged often and robustly with the aforementioned "community partners," charities, and philanthropic organizations. I am proud to say that my wife and I personally re-directed more than \$150,000 in real estate commissions to numerous local charities. In addition my wife and I make an effort to donate our time, energy and brain power. To that end, I am proud to say that I sat on the Board of Directors at the SF Child Abuse Prevention Center, and also served as Vice Board Chair at the SF YMCA. With any luck, I will continue to have the time, ability and resources to expand my public service in the years to come.

In 2012 I was fortunate enough to be invited to join the fine men and woman at Vanguard Real Estate -- my new home. At Vanguard I have found a kinship in spirit and intellect. I am pleased and proud to work with my many loyal clients and to continually move ahead in this exciting field.

After several years as Chairman of the SFAR "forms committee" and many other appointments and committee positions, in 2015 I was elected to the Board of Directors for the San Francisco Association of Realtor -- an association of four thousand local real estate agents and affiliated brokerage houses. As a board member I am tasked with assisting to guide and shepherd the association and its members into the exciting future of real estate.

Daniel Hershkowitz, Esq. | Broker Associate

[Vanguard Properties](#) | 2501 Mission Street, San Francisco, CA 94110

Direct Tel: 415.577.9065

Mrkantastic@Yahoo.com or Mrkantastic@VanguardSF.com

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: Angela M. Cheung Home Address: Clay Street

City: San Francisco State: CA Zip code: 94109

Business Address: 1725 Clay Street #102 City: San Francisco State: CA Zip Code: 94109

Home Phone: _____ Work Phone: (415) 706-7688 Fax #: (415) 276-6026

Pager #: _____ E-Mail Address: angela@_____

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'm sitting on Board 3 of AAB. I've been a real estate professional since 1992 & obtained Broker license in 1996. I own my brokerage firm since 2003.

Please state your business and/or professional experience: Managing Broker / President of Pillar Capital with 23+ years of real estate experience.

Occupation: Real Estate Broker Education: B.S. Degree in Finance

Civic Activities: Regular blood donor & city charity events supporter.

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? one How many evenings a week? one

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 12, 2015 Applicant's Signature: [Signature]

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

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Date Initial Filing
Received
Official Use Only

E-Filed
03/22/2015
21:04:38
Filing ID:
154680419

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Cheung, Angela

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City and County of San Francisco
Division, Board, Department, District, if applicable
Assessment Appeals Board
Your Position
Member

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

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, 2014, through December 31, 2014
-or-
The period covered is 12 / 18 / 2013, through December 31, 2014
- 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, 2014, 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: 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)
 San Francisco CA 94109

DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
 ()

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 03/22/2015
(month, day, year)

Signature Angela Cheung
(File the originally signed statement with your filing official)

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 _____
Cheung, Angela

1. BUSINESS ENTITY OR TRUST

Pillar Capital
Name _____
San Francisco, CA 94109
Address (Business Address Acceptable) _____
Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS
Real Estate Brokerage Firm

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$0 - \$1,999
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

ACQUIRED _____ DISPOSED _____

NATURE OF INVESTMENT
 Partnership Sole Proprietorship Other _____

YOUR BUSINESS POSITION President/Managing Broker

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 THIS BUSINESS

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$0 - \$1,999
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

ACQUIRED _____ DISPOSED _____

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

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 or Names listed below

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

None or Names listed below

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 _____

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

ACQUIRED _____ DISPOSED _____

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

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 _____

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

ACQUIRED _____ DISPOSED _____

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: _____

SCHEDULE C

Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name _____
Cheung, Angela

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Pillar Capital

ADDRESS (Business Address Acceptable)
San Francisco, CA 94109

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
 Salary Spouse's or registered domestic partner's income
(For self-employed use Schedule A-2.)
 Partnership (Less than 10% ownership. For 10% or greater use
Schedule A-2.)
 Sale of _____
(Real property, car, boat, etc.)
 Loan repayment
 Commission or Rental Income, list each source of \$10,000 or more

(Describe)
 Other _____
(Describe)

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
 Salary Spouse's or registered domestic partner's income
(For self-employed use Schedule A-2.)
 Partnership (Less than 10% ownership. For 10% or greater use
Schedule A-2.)
 Sale of _____
(Real property, car, boat, etc.)
 Loan repayment
 Commission or Rental Income, list each source of \$10,000 or more

(Describe)
 Other _____
(Describe)

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, 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 _____

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

INTEREST RATE _____% None

TERM (Months/Years) _____

SECURITY FOR LOAN
 None Personal residence
 Real Property _____
Street address _____
City _____
 Guarantor _____
 Other _____
(Describe)

Comments: _____

Somera, Alisa (BOS)

From: Angela Cheung <angela@thepillarcapital.com>
Sent: Tuesday, September 22, 2015 2:34 PM
To: Avalos, John (BOS)
Cc: Hsieh, Frances (BOS); Pollock, Jeremy (BOS); Rubenstein, Beth (BOS); Somera, Alisa (BOS)
Subject: RE: Assessment Appeals Board No. 2_Appointment hearing

Dear Supervisor Avalos,

I would like to take this opportunity to introduce myself to you; My name is Angela Cheung and I am one of the 4 applicants applying for the available seats opening in Board 2. I am also one of the current members of Board 3 as well.

I have been in the real estate industry since 1992; a year before I graduated from the California State of University, East Bay with a Finance Degree with emphasis on Real Estate Investment. I also continued my further education on real estate by obtaining my appraisal certificate and loan underwriting certificate through the same university in 1994/1995. Thereafter, I obtained my real estate broker license in 1996. With my departing from Pacific Union Real Estate Group in 2003, I then established my own brokerage firm. I have almost 24 years real estate experience in San Francisco where I have done numerous transactions in both residential and commercial properties. Also, I am currently managing three separate development residential projects in San Francisco, which now allows me to be able to have a relatively stable working schedule. With that said, I am in a better position more than ever to commit my time to serve the community.

After serving on the Board 3 for 2 years now, and a few times substituting other Commissioners at Board 2 while they were not available for the hearings, I very much enjoy my role in serving the community through Assessment Appeals Board and by sharing my own experience, knowledge, and expertise in real estate. Being a full time real estate professional in San Francisco for almost 24 years, I am familiar with each neighborhood and the type of properties located within their respective areas. My knowledge and experience enable me to deliver a fair and reasonable judgment on every case.

I realize and understand that every judgment we make, as a Commissioner, will affect the property taxes to both Taxpayers and City revenues. Our every judgment counts.

On top of my profession, I also served as a Board Member at one of the charity organizations in Visitacion Valley, San Francisco, which is called Asian Pacific American Community Center, and I am in the process of organizing an advisory board for this organization where I will be the President. I am also a long term supporter of other non-profits such as APA (Asian Perinatal Advocates), Clinic By the Bay, Gum Moon Women's Residence and some local community organizations.

By joining Board 2 as their regular Member, I am sure I can continue my mission and aspiration to serve the community as well as the City of San Francisco.

Please kindly let me know if you have any questions. I am more than happy to answer your questions by email or phone; please feel free to call me at my cell 415-706-7688.

Thank you very much and I look forward to the hearing on Thursday.

Best Regards,
Angela Cheung
President | Broker
C : 415-706-7688
CA BRE #01142918

Pillar Capital | www.thepillarcapital.com
O : 415-931-3922 | F : 415-276-6026
1725 Clay Street #102, San Francisco, CA 94109
14 Webster Street, Brookline, MA 02446

Somera, Alisa (BOS)

From: Angela Cheung <angela@thepillarcapital.com>
Sent: Tuesday, September 22, 2015 2:34 PM
To: Tang, Katy (BOS)
Cc: Quizon, Dyanna (BOS); Somera, Alisa (BOS)
Subject: RE: Assessment Appeals Board No. 2_Appointment hearing

Dear Supervisor Tang,

How are you? Hope all is well.

I would like to take this opportunity to express my sincerity on seating on Board 2 where I am one of the 4 applicants applying for the available seats opening. I am also one of the current members of Board 3 as well.

I have been in the real estate industry since 1992; a year before I graduated from the California State of University, East Bay with a Finance Degree with emphasis on Real Estate Investment. I also continued my further education on real estate by obtaining my appraisal certificate and loan underwriting certificate through the same university in 1994/1995. Thereafter, I obtained my real state broker license in 1996. With my departing from Pacific Union Real Estate Group in 2003, I then established my own brokerage firm. I have almost 24 years real estate experience in San Francisco where I have done numerous transactions in both residential and commercial properties. Also, I am currently managing three separate development residential projects in San Francisco, which now allows me to be able to have a relatively stable working schedule. With that said, I am in a better position more than ever to commit my time to serve the community.

After serving on the Board 3 for 2 years now, and a few times substituting other Commissioners at Board 2 while they were not available for the hearings, I very much enjoy my role in serving the community through Assessment Appeals Board and by sharing my own experience, knowledge, and expertise in real estate. Being a full time real estate professional in San Francisco for almost 24 years, I am familiar with each neighborhood and the type of properties located within their respective areas. My knowledge and experience enable me to deliver a fair and reasonable judgment on every case.

I realize and understand that every judgment we make, as a Commissioner, will affect the property taxes to both Taxpayers and City revenues. Our every judgment counts.

On top of my profession, I also served as a Board Member at one of the charity organizations in Visitacion Valley, San Francisco, which is called Asian Pacific American Community Center, and I am

in the process of organizing an advisory board for this organization where I will be the President. I am also a long term supporter of other non-profits such as APA (Asian Perinatal Advocates), Clinic By the Bay, Gum Moon Women's Residence and some local community organizations.

By joining Board 2 as their regular Member, I am sure I can continue my mission and aspiration to serve the community as well as the City of San Francisco.

Please kindly let me know if you have any questions. I am more than happy to answer your questions by email or phone; please feel free to call me at my cell 415-706-7688.

Thank you very much and I look forward to the hearing on Thursday.

Best Regards,
Angela Cheung
President | Broker
C : 415-706-7688
CA BRE #01142918

Pillar Capital | www.thepillarcapital.com
O : 415-931-3922 | F : 415-276-6026
1725 Clay Street #102, San Francisco, CA 94109
14 Webster Street, Brookline, MA 02446

Somera, Alisa (BOS)

From: Angela Cheung <angela@thepillarcapital.com>
Sent: Tuesday, September 22, 2015 2:34 PM
o: Cohen, Malia (BOS)
Cc: Chan, Yoyo (BOS); Bruss, Andrea (BOS); Somera, Alisa (BOS)
Subject: RE: Assessment Appeals Board No. 2_Appointment hearing

Dear Supervisor Cohen,

How are you? Hope all is well.

I would like to take this opportunity to express my sincerity on seating on Board 2 where I am one of the 4 applicants applying for the available seats opening. I am also one of the current members of Board 3 as well.

I have been in the real estate industry since 1992; a year before I graduated from the California State of University, East Bay with a Finance Degree with emphasis on Real Estate Investment. I also continued my further education on real estate by obtaining my appraisal certificate and loan underwriting certificate through the same university in 1994/1995. Thereafter, I obtained my real state broker license in 1996. With my departing from Pacific Union Real Estate Group in 2003, I then established my own brokerage firm. I have almost 24 years real estate experience in San Francisco where I have done numerous transactions in both residential and commercial properties. Also, I am currently managing three separate development residential projects in San Francisco, which now allows me to be able to have a relatively stable working schedule. With that said, I am in a better position more than ever to commit my time to serve the community.

After serving on the Board 3 for 2 years now, and a few times substituting other Commissioners at Board 2 while they were not available for the hearings, I very much enjoy my role in serving the community through Assessment Appeals Board and by sharing my own experience, knowledge, and expertise in real estate. Being a full time real estate professional in San Francisco for almost 24 years, I am familiar with each neighborhood and the type of properties located within their respective areas. My knowledge and experience enable me to deliver a fair and reasonable judgment on every case.

I realize and understand that every judgment we make, as a Commissioner, will affect the property taxes to both Taxpayers and City revenues. Our every judgment counts.

On top of my profession, as you know that I was one of the board members at Asian Pacific American Community Center, and I am now in the process of organizing an advisory board for this organization

where I will be the President. I am also a long term supporter of other non-profits such as APA (Asian Perinatal Advocates), Clinic By the Bay, Gum Moon Women's Residence and some local community organizations.

By joining Board 2 as their regular Member, I am sure I can continue my mission and aspiration to serve the community as well as the City of San Francisco.

Please kindly let me know if you have any questions. I am more than happy to answer your questions by email or phone; please feel free to call me at my cell 415-706-7688.

Thank you very much and I look forward to the hearing on Thursday.

Best Regards,
Angela Cheung
President | Broker
C : 415-706-7688
CA BRE #01142918

Pillar Capital | www.thepillarcapital.com
O : 415-931-3922 | F : 415-276-6026
1725 Clay Street #102, San Francisco, CA 94109
14 Webster Street, Brookline, MA 02446

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 2 or Board 1 Alternate
 Board 3 or Board 2 Alternate
 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: Joyce Lewis Home Address: 48th Ave
 City: San Francisco State: CA Zip code: 94122
 Business Address: 4150 Clement St. Bldg 210 City: SF State: CA Zip Code: 94121
 Home Phone: (415) _____ Work Phone: (415) 750-2288 Fax #: _____
 Pager #: N/A E-Mail Address: joyce.lewis25@_____

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 attorney State of California #163342

Please state your business and/or professional experience: Incumbent Commissioner / Hearing Officer AAB # 2; experienced government attorney

Occupation: Federal attorney Education: Juris Doctorate Santa Clara University

Civic Activities: Incumbent Assessment appeals bdr., mentor

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? 1-2 How many evenings a week? _____
 Have you attended an Assessment Appeals Board meeting? Yes No

Appearance before the RULES COMMITTEE is a requirement before any appointment can be made.
 Please Note: Your application will be retained for one year.

Date: 8/24/2015 Applicant's Signature: Joyce Lewis

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

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION
 A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Date Initial Filing

Received
Official Use OnlyE-Filed
03/26/2015
21:50:46Filing ID:
154793863

Please type or print in ink.

 NAME OF FILER (LAST) (FIRST) (MIDDLE)
 Lewis, Joyce
1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City and County of San Francisco

Division, Board, Department, District, if applicable

Your Position

Assessment Appeals Board

Alternate Board Member

▶ If filling for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box) State Judge or Court Commissioner (Statewide Jurisdiction) Multi-County San Francisco County of San Francisco City of San Francisco Other _____**3. Type of Statement (Check at least one box)** Annual: The period covered is January 1, 2014, through
December 31, 2014 Leaving Office: Date Left ____/____/____
(Check one)

-or-

The period covered is ____/____/____, through
December 31, 2014 The period covered is January 1, 2014, through the date of
leaving office. Assuming Office: Date assumed ____/____/____ The period covered is ____/____/____, through the date
of leaving office. 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: 2 Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-2 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule B - Real Property - schedule 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)

San Francisco CA 94122

DAYTIME TELEPHONE NUMBER

E-MAIL ADDRESS

()

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 03/26/2015
(month, day, year)Signature Joyce Lewis
(File the originally signed statement with your filing official.)

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION
 Name _____
 Lewis, Joyce

SCHEDULE B
Interests in Real Property
 (Including Rental Income)

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
 1561 48th Ave 3
 CITY
 San Francisco

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

ACQUIRED _____ DISPOSED _____

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

 CITY

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

ACQUIRED _____ DISPOSED _____

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: _____

BOARD of SUPERVISORS



City Hall
1 Dr. Carlton B. Goodlett Place, Room 244
San Francisco 94102-4689
Tel. No. 554-5184
Fax No. 554-5163
TDD/TTY No. 554-5227

VACANCY NOTICE

ASSESSMENT APPEALS BOARD NO. 2

Replaces All Previous Notices

NOTICE IS HEREBY GIVEN of the following vacancies:

Vacant seat 1, succeeding Louisa Mendoza, term expiring on September 7, 2015, must have a minimum of five years professional experience in the State of California as one of the following: certified public accountant or public accountant; licensed real estate broker; attorney; or a property appraiser accredited by a nationally recognized professional organization, certified by the Office of Real Estate Appraisers, or certified by the State Board of Equalization, for a three-year term ending September 3, 2018.

Vacant seat 5, succeeding Daniel Hershkowitz, term expiring on September 7, 2015, must have a minimum of five years professional experience in the State of California as one of the following: certified public accountant or public accountant; licensed real estate broker; attorney; or a property appraiser accredited by a nationally recognized professional organization, certified by the Office of Real Estate Appraisers, or certified by the State Board of Equalization, for a three-year term ending September 3, 2018.

Vacant seat 6 (Alternate Member), succeeding Joyce Lewis, term expiring on September 7, 2015, must have a minimum of five years professional experience in the State of California as one of the following: certified public accountant or public accountant; licensed real estate broker; attorney; or a property appraiser accredited by a nationally recognized professional organization, certified by the Office of Real Estate Appraisers, or certified by the State Board of Equalization, for a three-year term ending September 3, 2018.

Vacant seat 7 (Alternate Member), succeeding Diana Daniel, term expiring on September 7, 2015, must have a minimum of five years professional experience in the State of California as one of the following: certified public accountant or public accountant; licensed real estate broker; attorney; or a property appraiser accredited by a nationally recognized professional organization, certified by the Office of Real Estate Appraisers, or certified by the State Board of Equalization, for a three-year term ending September 3, 2018.

Prohibition: No member shall, within the three years immediately preceding his/her appointment to the Board, have been an employee of an assessor's office.

Report: None.

Sunset Date: None.


Additional information relating to the Assessment Appeals Board No. 2 may be obtained by reviewing Administrative Code, Chapter 2B, available at <http://www.sfbos.org/sfmunicodes> or by visiting the Assessment Appeals Board's website at <http://www.sfbos.org/aab>.

Interested persons may obtain an application from the Assessment Appeals Board website at http://www.sfbos.org/aab_app or from the Rules Committee Clerk, and should be submitted to: 1 Dr. Carlton B. Goodlett Place, Room 244, San Francisco, CA 94102-4689. All applicants must be residents of San Francisco, unless otherwise stated.

Pursuant to Board of Supervisors Rules of Order 2.32 (Motion No. 05-92) all applicants applying for this Board must complete and submit, with their application, a copy (**not original**) of their Form 700, Statement of Economic Interests. Applications will not be considered if a copy of the Form 700 is not submitted. Form 700, Statement of Economic Interests, may be obtained at <http://www.sfbos.org/form700>.

Next Steps: Applicants who meet minimum qualifications will be contacted by the Rules Committee Clerk once the Rules Committee Chair determines the date of the hearing. Members of the Rules Committee will consider the appointment(s) at the meeting and applicant(s) may be asked to state their qualifications. The appointment(s) of the individual(s) who are recommended by the Rules Committee will be forwarded to the Board of Supervisors for final approval.

Please Note: Depending upon the posting date, these vacancies may have already been filled. To determine if the vacancies for this Board are still available or if you require additional information, please call the Rules Committee Clerk at (415) 554-4447.


Angela Calvillo
Clerk of the Board

DATED/POSTED: August 7, 2015

San Francisco
BOARD OF SUPERVISORS

Date Printed: September 18, 2015

Date Established: December 24, 1998

Active

ASSESSMENT APPEALS BOARD NO. 2

Contact and Address:

Dawn Duran
Assessment Appeals Board
City Hall, Room 405

Phone: (415) 554-6778

Fax: (415) 554-6775

Email: Dawn.Duran@sfgov.org

Authority:

Administrative Code, Chapter 2B et seq. (Added by Ordinance No. 37-67; Amended by Ordinances Nos. 110-68, 82-94, 86-96, 393-98, 273-99, and 128-13) and California Revenue and Taxation Code, Section 1620-1630.

Board Qualifications:

The Assessment Appeals Board No. 2 consists of eight (8) members (five (5) regular members, and three (3) alternate members) all appointed by the Board of Supervisors. No person may concurrently hold a seat on more than one of the three Assessment Appeals Boards.

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 California Revenue and Taxation Code, Section 1624.05, as follows: Must have a minimum of five years professional experience in the State of California as one of the following: Certified Public Accountant or Public Accountant; licensed Real Estate Broker; Attorney; or a Property Appraiser accredited by a nationally recognized professional organization, certified by the Office of Real Estate Appraisers, or certified by the State Board of Equalization.

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 have an equal opportunity over time to participate as hearing officers. The Clerk shall designate hearing

"R Board Description" (Screen Print)

San Francisco
BOARD OF SUPERVISORS

officers in the following priority order: (1) the regular member of Assessment Appeals Board No. 3; (2) the alternate members of Assessment Appeals Board No. 3; (3) the alternate members of Assessment Appeals Board No. 2; (4) the alternate members of Assessment Appeals Board No. 1; (5) the regular members of Assessment Appeals Board No. 2; and (6) the regular members of Assessment Appeals Board No. 1. In their capacity as assessment hearing officers, the officers shall serve at the pleasure of and by contract with the Board of Supervisors.

It shall be the duty of each Assessment Appeals Board to equalize the valuation of the taxable property within the City and County for the purposes of taxation in the manner and subject to the limitations contained in Article XIII of the California State Constitution. Assessment Appeals Board No. 2 shall have jurisdiction to hear applications for reductions only for property assessed at less than \$50,000,000, excluding applications involving possessory interests or real property located all or in part within Assessor's Block Nos. 1-876 or 3701-3899, and reduction for residential real property consisting of four units or less within Assessor's Block Nos. 1-876 or 3701-3899.

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

Report: Pursuant to California Revenue and Taxation Code, Section 1639, 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.

Sunset Clause: None

