File No	140994	Committee Item No6	
 -		Board Item No.	

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Rules		Date	October 2, 2014
Board of Supervisors	Meeting	Date	
Board of Oupervisors	, weeting	Date	· · · · · · · · · · · · · · · · · · ·
Cmte Board			
Budget Youth C Introduct Departm MOU Grant In Subcont Contrac	ce ive Digest and Legislative Analyst Rep ommission Report stion Form nent/Agency Cover Letter an formation Form udget tract Budget t/Agreement 6 – Ethics Commission etter		port
Public C	Correspondence		
OTHER (Use bad	ck side if additional space i	s neede	d)
	u Notice ation Sheet 100		
Completed by: Alisa	SomeraDat	e Septe	ember 26, 2014
Completed by:	Dat	-	

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



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

Revised July 2013

	Complete and return	n this original Ap	oplication to th	e Assess	ment Appeals Board	
, d	Application for Appoint			or	Board 1 Alternate	
, -	(Please circle one,	1	Board 2	or	Board 2 Alternate	
Entor vous n	nome molling address and days	imo talanhana ni m	Board 3	or	Board 3 Alternate	- 11 1
for public re	view, you may list your busines nal contact information.	s/office address, te	lephone number	and e-mail	Because this form is a document address in lieu of your home addre	avalla! ess or
Do you aut	thorize release of your priva	te/personal inform	nation?	yes 🗀	no .	
Name:	Diane Robins	m Ho	ome Address:		The Avenue	
					Zip code: 94/22	
					State: Zip Code:	
Home Pho	ne: <u>415</u> -	Work Phone:	415-26	9-743	// Fax #:	
Pager#:		_ E-Mail Addres	ss:		# 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Are you a l	United States citizen, or a re	sident alien who	is eligible for an	d has app	lied for citizenship? WYes] No
would be a (If	ever been convicted of a felony? Yes No yes, please attach a statement of the conviction(s), a	ent describing the	e offense(s) for v	which you	e which, if committed in this sta have been convicted,	te,
Pursuant 1	to Ordinance No. 393-98 tł	e following qua	lifications are i	required:		
accountant nationally r Appraiser o application same seats	t or public accountant; (2) lic recognized professional orga or by the State Board of Equ of form. This requirement do	ensed real estate anization, or prope alization. Docum es not apply to ind	broker; (3) atto erty appraiser of entation of qua- cumbent board i	rney; or (ertified by lifying exp members	he following: (1) certified public 4) property appraiser accredited either the Office of Real Estate erience must be submitted with nominated for appointment to the	d by a e n this heir
Please stat	te your business and/or prof	essional experier	oce: As a	domn	parcial real so to	to
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Ethnicity (c			Sex (optional):	<u> </u>	₩F	
Other Pers	sonal Information (optional)			<u></u> :		_
How many	be able to attend Day Meet days a week would you be attended an Assessment Ap	available for hear		-	g meetings? Yes No any evenings a week? <u>WAR</u>	
	pearance before the RULE	S COMMITTEE IS	s a requiremen	t before a	any appointment can be mad	е.
	Please	Note: Your applic	# .	ained for	one year.	
Date:	2/17/1	Applicant's Sig	nature: <u>/////</u>	<u>YL </u>	<u>una</u>	
For Office	Use Only: Appointed to Bo	ard #:	Seat #:		Term Expires:	

Please type or print in ink.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Received

E-Filed 03/13/2014 16:36:10

Filing ID: 150002671

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Robinson, Diane		
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 attachmen	nt. (Do not use acronyms)	
Agency:	Position:	
2. Jurisdiction of Office (Check at least one box)		
State	☐ Judge or Court Commissioner (S	tatewide Jurisdiction)
Multi-County	X County of San Francisco	
City of		
	Other	
3. Type of Statement (Check at least one box)		
Annual: The period covered is January 1, 2013, throug December 31, 2013	Leaving Office: Date Left (Check one)	
The period covered is/, the December 31, 2013	orrough OThe period covered is Janual leaving office.	ary 1, 2013, through the date of
Assuming Office: Date assumed/	_	, through the date
Candidate: Election Year and of	ice sought, if different than Part 1:	
4. Schedule Summary		
Check applicable schedules or "None."	► Total number of pages including this o	over page:4
X Schedule A-1 - Investments – schedule attached	Schedule C - Income, Loans, & Bus	iness Positions - schedule attached
Schedule A-2 - Investments - schedule attached	Schedule D - Income - Gifts - sche	dule attached
Schedule B - Real Property – schedule attached	Schedule E - Income - Gifts - Trave	el Payments - schedule attached
_	-or-	
☐ None - No r	eportable interests on any schedule	
5. Verification		
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	CITY STATE	ZIP CODE
	San Francisco CA	94122
DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS (OPTIONAL)	•
()	A Theorem and the statement of the tree of	knowledge the information contained
I have used all reasonable diligence in preparing this statement 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 S	tate of California that the foregoing is true and corre	ct.
Date Signed 03/13/2014 (month, day, year)	Signature <u>Diane Robinson</u> (File the originally signed sta	lement with your filing official.)
(month, day, year)	(, , ,

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	
Robinson, Diane	-

	NAME OF BUSINESS ENTITY	F	NAME OF BUSINESS ENTITY	_
	Bank of America		Caterpillar	
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS	
	banking		heavy equipment manufacturer	
	FAIR MARKET VÁLUE	1	FAIR MARKET VALUE	
	\$2,000 - \$10,000 X \$10,001 - \$100,000			
	\$100,001 - \$1.000,000 Over \$1,000,000		\$100,001 - \$1,000,000 Over \$1,000,000	
	NATURE OF INVESTMENT Stock ☐ Other		NATURE OF INVESTMENT Stock ☐ Other	
	(Describe)	ŀ	(Describe)	
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)		Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C	;)
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:	
		1		
	ACQUIRED DISPOSED	↓	ACQUIRED DISPOSED	
>	NAME OF BUSINESS ENTITY	>	NAME OF BUSINESS ENTITY	
	Costco		Cummins	
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS	
	warehouse stores		engine manufacturer	
	FAIR MARKET VALUE		FAIR MARKET VALUE	
	☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000		▼ \$2,000 - \$10,000	
	\$100,001 - \$1,000,000 Over \$1,000,000		\$100,001 - \$1,000,000 Over \$1,000,000	
	NATURE OF INVESTMENT		NATURE OF INVESTMENT	
	Stock Other		Stock Other	
	(Describe)	1	(Describe)	
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)		Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C))
			G	_
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:	
	ACQUIRED DISPOSED		ACQUIRED DISPOSED	٠
<u></u>	NAME OF BUSINESS ENTITY	┢	NAME OF BUSINESS ENTITY	-
	Ford	1	General Electric	
	GENERAL DESCRIPTION OF THIS BUSINESS	1	GENERAL DESCRIPTION OF THIS BUSINESS	
	automobile manufacturer		diversified manufacturer FAIR MARKET VALUE	
	FAIR MARKET VALUE \$\Bigcup \\$2,000 \circ \\$10,000 \Bigcup \\$10,001 - \\$100,000		▼ \$2,000 - \$10,000	
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	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)		Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C	21
				,
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:	
	ACQUIRED DISPOSED	.	ACQUIRED DISPOSED	
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SCHEDULE A-1 Investments

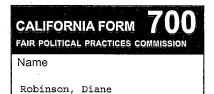
Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Robinson, Diane

<u> </u>	NAME OF BUSINESS ENTITY		NAME OF BUSINESS ENTITY
	Home Depot	ļ	Intel Corporation
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS
	İ		
٠	Warehouse hardware store		Computer chip maker
	FAIR MARKET VALUE		FAIR MARKET VALUE
	∑ \$2,000 - \$10,000		∑ \$2,000 - \$10,000
	\$100,001 - \$1,000,000 Over \$1,000,000		\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT Stock Other		NATURE OF INVESTMENT
	(Describe)		Stock Other (Describe)
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		1	
	ACQUIRED DISPOSED	1	ACQUIRED DISPOSED
•	NAME OF BUSINESS ENTITY		NAME OF BUSINESS ENTITY
	Oracle Corporation		Synovus Financial
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS
	software manufacturer		Regional bank
	FAIR MARKET VALUE		FAIR MARKET VALUE
	▼ \$2,000 - \$10,000	İ	\$2,000 - \$10,000 X \$10,001 - \$100,000
	\$100,001 - \$1,000,000 Over \$1,000,000		\$100,001 - \$1,000,000 Over \$1,000,000
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	NATURE OF INVESTMENT Stock Other		NATURE OF INVESTMENT Stock Other
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•	NAME OF BUSINESS ENTITY		NAME OF BUSINESS ENTITY
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS
	FAIR MARKET VALUE		FAIR MARKET VALUE
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	\$100,001 - \$1,000,000 Over \$1,000,000		\$100,001 - \$1,000,000 Over \$1,000,000
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	ACQUIRED DISPOSED		ACQUIRED DISPOSED
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C	omments:		

SCHEDULE D Income - Gifts



NAME OF SOURCE (Not an A	cronym)	► NAME OF SOURCE (Not an A	(econym)
	5.0.1911.7	NAME OF SOURCE (NOT AIT A	Cionym)
George Weingart			
ADDRESS (Business Address A	Acceptable)	ADDRESS (Business Address	Acceptable)
San Francisco, CA 94			<u> </u>
BUSINESS ACTIVITY, IF ANY,	OF SOURCE	BUSINESS ACTIVITY, IF ANY,	OF SOURCE
	•		
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)
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/\$		/\$	<u> </u>
/\$			
		- 	
NAME OF SOURCE (Not an A	cronym)	► NAME OF SOURCE (Not an A	Acronym)
ADDRESS (Business Address)	Acceptable)	ADDRESS (Business Address	Acceptable)
		†	
BUSINESS ACTIVITY, IF ANY,	OF SOURCE	BUSINESS ACTIVITY, IF ANY,	OF SOURCE
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ADDRESS (Business Address)	Acceptable)	ADDRESS (Business Address	Acceptable)
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BUSINESS ACTIVITY, IF ANY,	OF SOURCE	BUSINESS ACTIVITY, IF ANY,	OF SOURCE
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Comments:			

Assessment Appea.s 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 App	lication to the	Assessn	nent Appeals	Board	·
, se	Application for Appointm (Please circle one)	. 1	Board 1 Board 2 Board 3	or	Board 1 Alte Board 2 Alte Board 3 Alte	rnate	Seaf #7 Incumb
for public re	name, mailing address and daytin eview, you may list your business/ onal contact information.						
Do you at	uthorize release of your private	/personal informa	tion? 🗌 y	res 🔀	no		
	Richard Lee					• . <u></u>	
City:	Son Francisco		State:	A	Zip code:	94134	
		·					
	one: 4:5	Work Phone:					·
Pager #: _		E-Mail Address	cichle	ee.2(<u>}</u>		
	United States citizen, or a resi						es 🗌 No
would be (li ti	ever been convicted of a felona felony? Yes No fyes, please attach a statement date of the conviction(s), and to Ordinance No. 393-98 the	nt describing the code the code the court (s) that	offense(s) for w t convicted you	hich you h			is state,
she has a accountar nationally Appraiser application same sea	person shall not be eligible for minimum of five years' profes of or public accountant; (2) lice recognized professional organ or by the State Board of Equan form. This requirement does to.	sional experience nsed real estate b nization, or propen lization. Docume	in this state as proker; (3) attor ty appraiser ce ntation of quali mbent board m	s one of th mey; or (4 ertified by e fying expe nembers n	e following: (1)) property appletither the Officerience must be ominated for a	certified praiser accr e of Real E e submitte ppointmer	oublic edited by a Estate d with this
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Please sta	ate your business and/or profe	ssional experience	e: <u>manb</u>	iar, 1	Assessment	Appea	Li Board
Occupation	on: Property man	rge-	Education:_	BS.	-Business	·	<u></u>
Civic Activ	vities:	·		<u> </u>		<u> </u>	· · · · · ·
Ethnicity ((optional):		ex (optional):	⋈ М	□F		
Other Per	rsonal Information (optional)	· · · · · · · · · · · · · · · · · · ·				<u> </u>	· ·
How man Have you	u be able to attend Day Meetir y days a week would you be a attended an Assessment App	vailable for hearin eals Board meetir	ng? 🛚 Yes	How man	ny evenings a	week?	
Ap	ppearance before the <i>RULES</i> Please N	<i>COMMITTEE</i> is a ote : Your applica	a requirement tion will be reta	ained for c	ny appointme ne year.	REC	EIVED
Date:	8/8/14	Applicant's Signa			() ~1	AUG	0 8 2014
For Offic	e Use Only: Appointed to Boa	rd #:	Seat #:		Term Exp	ires: Assessmen	t Appeals Board

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Received Officer Use Only 8-Hilbert 03/44/2014 12:02:40

Please type or print in ink. 1503 19359 NAME OF FILER (LAST) (FIRST) (MIDDLE) Lee, Richard 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) Position: 2. Jurisdiction of Office (Check at least one box) ☐ Judge or Court Commissioner (Statewide Jurisdiction) X County of San Francisco Multi-County ____ City of _ Other . 3. Type of Statement (Check at least one box) [X] Annual: The period covered is January 1, 2013, through Leaving Office: Date Left ____/___ December 31, 2013 -or-O The period covered is January 1, 2013, through the date of The period covered is ____/___, through leaving office. December 31, 2013 ○ The period covered is ______, through the date Assuming Office: Date assumed ____/___/_ 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: ____1 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 X 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 94102 DAYTIME TELEPHONE NUMBER E-MAIL 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. Signature Richard Lee Date Signed _03/14/2014

(File the originally signed statement with your filing official,)

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



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

Revised July 2013

Complete and return t	his original Ap	plication to the	Assessi	nent Appeal	s Board	
Application for Appointm (Please circle one)	ent to:	Board 1 Board 2 Board 3		Board 1 Al Board 2 Al Board 3 Al	ternate ternate	
Enter your name, mailing address and daytim for public review, you may list your business/c other personal contact information.	e telephone num office address, tel	ber in the spaces p ephone number an	rovided. d e-mail a	Daggueg this f		ıvailable ss or
Do you authorize release of your private/	personal inform	ation? 📝 ye	es 🗆	no		
Name: Yosef Tahbazof	Ho	me Address:	·			
Name: Yosef Tahbazof City:		State:		Zip code:		
Business Address: 1256 Howard Street		City: San Franc	cisco	State: CA	Zip Code: 9410)3
Home Phone:	Work Phone:	415.922.0200 x 1	111	Fax #: 415.	922.0203	
Pager #:						
Are you a United States citizen, or a resid	ent alien who is	eligible for and h	nas appli	ed for citizen	ship? 🗸 Yes] No
Have you ever been convicted of a felony would be a felony? Yes No (If yes, please attach a statement the date of the conviction(s), and	describing the	offense(s) for whi	ich vou h			€,
Pursuant to Ordinance No. 393-98 the t	ollowing quali	fications are req	uired:	—:		
A person shall not be eligible for i she has a minimum of five years' professi accountant or public accountant; (2) licent nationally recognized professional organiz Appraiser or by the State Board of Equaliz application form. This requirement does i same seats.	onal experience sed real estate l zation, or propel zation. Docume	e in this state as c broker; (3) attorne rty appraiser certi entation of qualify	one of the ey; or (4) ified by e ina exne	e following: (1 property app hither the Offic rience must h	certified public praiser accredited ce of Real Estate submitted with	by a
Please state your qualifications: Attorney Board #3.	practicing law in	n San Francisco;	Commis	sioner on As	sessment Appeals	<u> </u>
Please state your business and/or profess management experience.	ional experienc	e: Real estate at	torney w	ith accountin	g and property	-
Occupation: Attorney		Education: B.S	S. in Con	merce; J.D.		- -
Civic Activities: Campaign volunteer.						_
Ethnicity (optional):	S	Sex (optional):	✓ M	_]F		
Other Personal Information (optional)		-				_
Would you be able to attend Day Meetings How many days a week would you be ava Have you attended an Assessment Appea	ilable for hearin Is Board meetir	gs? <u>As needed</u> ⊢ ng? ☑ Yes ┃	low man No	y evenings a		
Appearance before the RULES C	OMMITTEE is a	a requirement be tion will be retain	efore an	y appointme	ent can be made.	
Date: 8/18/14	pplicant's Signa		0010101	year.		
For Office Use Only: Appointed to Board		Seat #		Term Evn	iroc:	

1256 Howard Street San Francisco, CA 94103

(415) 601-5529

yosef@

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 / Accounting, 2008

EXPERIENCE

Tahbazof Law Firm, San Francisco, CA Partner

August 2011 - Present

- San Francisco-based law firm specializing in real estate law, with experience in real
 property purchase agreements, LLC operating agreements, stipulations, settlement
 agreements, prime contracts, subcontractor agreements, lease agreements and
 employment contracts.
- Representing clients in real estate disputes and cases concerning mechanics' liens, construction defects, unlawful detainers and breach of contractual obligations.
- Proven track record of successfully negotiating settlements resulting in fair compromises and the avoidance of cumbersome litigation.

SST Investments, San Francisco, CA Director

August 2011 - Present

- Management and maintenance of the company's portfolio that includes several hundred residential rental units as well as commercial buildings.
- Mediation of conflicts with tenants and neighbors; management of tenant complaints and repair requests from start to finish, including the coordination of independent contractors; implementation of a custom work order tracking system.
- Lead counsel ensuring legal compliance of the company operations.
- Creation and management of project-specific construction accounting programs.
- Secured over \$10 million in financing for construction projects, and successfully led refinancing efforts for dozens of apartment buildings.
- Actively engaged in construction management, including negotiation of supply and service contracts; management of employees and contractors; utility service coordination; general oversight of quality of work.

Ross Madden Law, San Francisco, CA Paralegal

May 2010 - August 2010

- Drafted 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

- Implemented corporate guidelines and GAAP to prepare unified documents for the financial reporting of publicly traded corporations.
- Translated complex financial information into user-friendly formats for clientele.
- Researched Transfer Pricing Division guarantee agreements, capital infusion agreements and capital support agreements.

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

ACTIVITIES

Civic Activities: Commissioner, Assessment Appeals Board #3; Campaign Volunteer for San Francisco Mayor Newsom & Supervisor Alioto-Pier.

Non-Profit Volunteer: Shelter Network, Home Away from Homelessness

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

Please type or print in ink.



STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Received

6-8ileri 91:15/2014 16.37:18

Fiting 10 149129770

NAME OF FILER (LAST)	(FIRST) (MIDDLE)
Tahbazof, Yosef	
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	
चित्र (San Francisco	
	Other
3. Type of Statement (Check at least one box)	
Annual: The period covered is January 1, 2013, through December 31, 2013	Leaving Office: Date Left/(Check one)
The period covered is/, throug December 31, 2013	ogh The period covered is January 1, 2013, through the date of leaving office.
🗵 Assuming Office: Date assumed 12 / 17 / 2013	The period covered is, through the date of leaving office.
Candidate: Election Year and office s	sought, if different than Part 1:
4. Schedule Summary	
Check applicable schedules or "None."	► Total number of pages including this cover page:7
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 report	rtable interests on any schedule
5. Verification	
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	CITY STATE ZIP CODE
DAYTIME TELEPHONE NUMBER	San Francisco CA 94103
DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS (OPTIONAL)
I have used all reasonable diligence in preparing this statement. I herein and in any attached schedules is true and complete. I ack	have reviewed this statement and to the best of my knowledge the information contained knowledge this is a public document.
i certify under penalty of perjury under the laws of the State	
Date Signed 01/15/2014 (month, day, year)	Signature Yosef Tahbazof (File the originally signed statement with your filing official.)

Investments, Income, and Assets of Business Entities/Trusts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Tahbazof Yosef

▶ 1. BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
SYTS Investments, LLC	Tahbazof Law Firm, LLP
Name	Name
San Francisco, CA 94103	San Francisco, CA 94103
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one Trust, go to 2 X Business Entity, complete the box, then go to 2	Check one Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Real Estate Development & Management	Legal services
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$0 - \$1,999 \$2,000 - \$10,000	\$0 - \$1,999 \$2,000 - \$10,000
\$10,001 - \$100,000 ACQUIRED DISPOSED	▼ \$10,001 - \$100,000 ACQUIRED DISPOSED
\$100,001 - \$1,000,000	\$100,001 - \$1,000,000
X Over \$1,000,000	Over \$1,000,000 °
NATURE OF INVESTMENT Partnership Sole Proprietorship X LLC	NATURE OF INVESTMENT Partnership Sole Proprietorship LLP
Other	Other
YOUR BUSINESS POSITION Member; Attorney	YOUR BUSINESS POSITION Partner
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
□ \$0 - \$499 □ \$10,001 - \$100,000	□ \$0 - \$499
☐ \$500 - \$1,000	\$500 - \$1,000
☐ \$1,001 - \$10.000	
> 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separato shoot if nocessary.)	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Atlach a soparate sheet if necessary.)
None Non	None
▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity, if Investment, or	Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property	Assessor's Parcel Number or Street Address of Real Property
San Francisco	Description of Business Activity or
Description of Business Activity or City or Other Precise Location of Real Property	City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000	\$2,000 - \$10,000
\$10,001 - \$100,000	\$10,001 - \$100,000
\$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000	S100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Property Ownership/Deed of Trust Stock Partnership	Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Commente	FPPC Form 700 (2013/2014) Sch. A-2

Investments, Income, and Assets of Business Entities/Trusts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name
Tahbazof, Yosef

Name Address (Business Address (Business Address Acoptable) Check one Trust, go to 2 Business Entity, complete the box, then go to 2 GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS FAR MARKET VALUE	► 1. BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
Address (Business Address Acceptable) Check one Titust, go to 2	SYTS Investments, LLC(CONTINUATION)	
Check one Trust, go to 2 Business Entity, complete the box, than go to 2	Name	Name
Creek one	Address (Business Address Acceptable)	Address (Business Address Acceptable)
GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS FAIR MARKET VALUE FAPPLICABLE, LIST DATE: SO - 51,099 S2,000 - \$10,000 Over \$1,000,000 Over \$1,000,000 Over \$1,000,000 Over \$1,000,000 Over \$1,000,000 Over \$1,000,000 MATURE OF INVESTMENT Other VOUR BUSINESS POSITION SIGNATION OF THIS BUSINESS SO - 51,099 \$2,000 - \$10,000 Over \$1,000,000 SIGNATION OF THIS BUSINESS SO - 51,000 Over \$1,000,000 SIGNATION OF THIS BUSINESS SIGNATION OF THIS BUSINE	_	Check one
FAIR MARKET VALUE FAPPLICABLE, LIST DATE: So - \$1,999 \$0,000 - \$10,000 \$10,000 - \$100,000 \$10,000 - \$100,000 \$10,000 - \$1,000	Business Entity, complete the gox, then go to 2	Trust, go to 2 Business Entity, complete the box, then go to 2
So. 3 - \$1,000 So. 200 - \$10,000 So. 200 - \$10,0	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Sp. 3. \$1,999 Sp. 3. \$1,900 Sp. 3. \$1,000 Sp	FAIR MARKET VALUE IF APPLICABLE LIST DATE:	EAID MADICET VALUE
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Over \$1,000,000 NATURE OF INVESTMENT Partneriship Sole Proprietorship Other YOUR BUSINESS POSITION Property P		
Partnership Sole Proprietorship Other Partnership Sole Proprietorship Sole Proprietorship Other Partnership Sole Proprietorship Other Partnership Sole Proprietorship Sole P	Over \$1,000,000	Over \$1,000,000
Other YOUR BUSINESS POSITION 22 IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) \$ 0 - \$499		
Start OF THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY TRUST) \$0 - \$499		
SO - \$499 \$10,001 - \$100,000 \$500 - \$4,000 \$500 - \$1,000 \$500 - \$1,000 \$500 - \$1,000 \$500 - \$1,000 \$500 - \$1,000 \$500 - \$1,000 \$500 - \$1,000 \$500 - \$1,000 \$500 - \$1,000 \$1,001 - \$1,000 \$1,000	YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
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\$1,001 - \$10,000		Ψ Φ (δ, δ δ) - Φ (δ δ δ δ δ δ δ δ δ δ δ δ δ δ δ δ δ δ
S. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary) None 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST. Check one box: INVESTMENT INVESTMENT IN REAL PROPERTY Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property San Francisco 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 - \$1,000,000 \$10,001 - \$1,000,000 ACQUIRED DISPOSED NATURE OF INTEREST		
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Name of Business Entity, if Investment. or Assessor's Parcel Number or Street Address of Real Property San Francisco Description of Business Activity or City or Other Precise Location of Real Property FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$1,000,000 \$10,001 - \$1,000,000 Over \$1,000,000 NATURE OF INTEREST Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property Description of Business Activity or City or Other Precise Location of Real Property FAIR MARKET VALUE	LEASED BY THE BUSINESS ENTITY OR TRUST	LEASED BY THE BUSINESS ENTITY OR TRUST
Name of Business Entity, if Investment. or Assessor's Parcel Number or Street Address of Real Property San Francisco Description of Business Activity or City or Other Precise Location of Real Property FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$1,000,000 Over \$1,000,000 NATURE OF INTEREST 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 \$2,000 - \$10,000 \$10,001 - \$100,000 Over \$1,000,000 NATURE OF INTEREST Interest Address of Real Property Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property FAIR MARKET VALUE \$15 APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 Over \$1,000,000 NATURE OF INTEREST		
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Assessor's Parcel Number or Street Address of Real Property San Francisco Description of Business Activity or City or Other Precise Location of Real Property FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000 NATURE OF INTEREST Assessor's Parcel Number or Street Address of Real Property Assessor's Parcel Number or Street Address of Real Property Assessor's Parcel Number or Street Address of Real Property 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 \$2,000 - \$10,000 \$2,000 - \$10,000 \$10,001 - \$100,000 Over \$1,000,000 NATURE OF INTEREST		
Description of Business Activity or City or Other Precise Location of Real Property FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 ACQUIRED \$1,000,000 NATURE OF INTEREST Description of Business Activity or City or Other Precise Location of Real Property FAIR MARKET VALUE \$1 APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000 NATURE OF INTEREST		Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
City or Other Precise Location of Real Property City or Other Precise Location of Real Property FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$1,000,000 ACQUIRED DISPOSED \$10,000 Over \$1,000,000 ACQUIRED NATURE OF INTEREST NATURE OF INTEREST		
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NATURE OF INTEREST NATURE OF INTEREST		
	Over \$1,000,000	Over \$1,000,000
X Property Ownership/Deed of Trust Stock Partnership Property Ownership/Deed of Trust Stock Partnership		N1
	☑ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership	Property Ownership/Deed of Trust Stock Partnership .
Leasehold Other Description Other Other		
Check box if additional schedules reporting investments or real property are attached		
FPPC Form 700 (2013/2014) Sch. A-2	Comments:	•

Investments, Income, and Assets of Business Entities/Trusts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Tahbazof, Yosef

▶ 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
SYTS Investments, LLC(CONTINUATION)	
Name	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one Trust, go to 2 Business Entity, complete the box, then go to 2	Check one Check one Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Partnership Sole Proprietorship	NATURE OF INVESTMENT Partnership Sole Proprietorship
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
S0 - \$499 S10,001 - \$100,000 S500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000
3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate attack if necessary.) None	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach o'soparato shoot if necessary.) None
▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	► 4. Investments and interests in real property held or leased by the business entity or trust
Check one box:	Check one box:
☐ INVESTMENT 🔀 REAL PROPERTY	NVESTMENT REAL PROPERTY
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
San Francisco Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments	FPPC Form 700 (2013/2014) Sch. A-2

Investments, Income, and Assets of Business Entities/Trusts

C FA	ALIFORNIA FORM 700
Ν	ame
T	ahbazof, Yosef

▶ 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
SYTS Investments, LLC(CONTINUATION)	
Name	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
Trust, go to 2 Business Entity, complete the box, then go to 2	☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE. LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$0 - \$1,999 \$2,000 - \$10,000	\$0 - \$1,999
\$10,001 - \$100,000 ACQUIRED DISPOSED	\$2,000 - \$10,000 DISPOSED
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Partnership Sole Proprietorship	Partnership Sole Proprietorship
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
	133. 27 178 178 178 178 178 178 178 178 178 17
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
☐ \$0 - \$499 ☐ \$10,001 - \$100,000 ☐ \$500 - \$1,000 ☐ OVER \$100,000	\$0 - \$499
\$1,001 - \$10,000	\$1,001 - \$10,000
➤ 3. LIST, THE NAME OF EACH, REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a soparate shoot if agcessary)	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a soparate sheet if necessary.)
None	None
▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR
LEASED BY THE BUSINESS ENTITY OR TRUST	LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT X REAL PROPERTY	INVESTMENT REAL PROPERTY
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
San Francisco	
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$10,001 - \$100,000	\$10,001 - \$100,000
\$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000	S100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
∑ Property Ownership/Deed of Trust	Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2013/2014) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov

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

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Tahbazof, Yosef

▶ 1, BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
SYTS Investments, LLC(CONTINUATION)	
Name	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2	☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
S0 - \$1,999	S0 - \$1,999
\$2,000 - \$10,000	\$2,000 - \$10,000
\$100.001 - \$1,000,000	\$100,001 - \$1,000,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INVESTMENT Partnership Sole Proprietorship	NATURE OF INVESTMENT Partnership Sole Proprietorship
Other	Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	► 2. IDENTIFY-THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
☐ \$0 - \$499 ☐ \$10,001 - \$100,000	☐ \$0 - \$499 ☐ \$10,001 - \$100,000
☐ \$500 - \$1,000 ☐ OVER \$100,000 ☐ \$1,001 - \$10,000	\$500 - \$1,000 OVER \$100,000
	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF
S LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a soperate sheet if necessary.)	INCOME OF \$10,000 OR MORE (Attach a separate sheat if necessary.)
None	None
▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
NVESTMENT X REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
San Francisco	Description of Punisses Activity of
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000	\$2,000 - \$10,000
\$10,001 - \$100,000	\$10,001 - \$100,000 S100,000 ACQUIRED DISPOSED
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Yrs, remaining Check box if additional schedules reporting investments or real property	Yrs. remaining Check box if additional schedules reporting investments or real property
are attached	are attached
Commenter	FPPC Form 700 (2013/2014) Sch. A-2

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFOR	NIA FORM al practices c	700
Name		
Tahbazof,	Yosef	· · · · · · · · · · · · · · · · · · ·

> 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
SST Investments, LLC	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
San Francisco, CA 94103	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Property Management & Development	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Property Manager, Legal Compliance Officer	
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
S500 - \$1,000 S1,001 - \$10,000	\$500 - \$1,000\$1,001 - \$10,000
∑ \$10,001 - \$100,000 ☐ OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
X Salary Spouse's or registered domestic partner's income	Salary Spouse's or registered domestic partner's income
Loan repayment Partnership	Loan repayment Partnership
Sale of(Real property, car, boal. etc.)	Sale of
(rear property, car, poat, etc.)	(Real property, car, boat, etc.)
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
C Oher	
Other(Describe)	Other(Describe)
> 2. Loans received or outstanding during the reporting per	RIOD
* You are not required to report loans from commercial le	ending institutions, or any indebtedness created as part of a
	e lender's regular course of business on terms available to
members of the public without regard to your official st regular course of business must be disclosed as follow	atus. Personal loans and loans received not in a lender's
regular course of business must be disclosed as follow	75.
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
	%
ADDRESS (Business Address Acceptable)	
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
\$500 - \$1,000	City
\$1,001 - \$10,000	
\$10,001 - \$100,000	Guarantor
OVER \$100,000	Other
	(Describe)
	(резолье)
	(Describe)
Comments:	(Describe)

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. 1

Replaces All Previous Notices

NOTICE IS HEREBY GIVEN of the following vacancies:

Vacant seat 3, succeeding Diane Robinson, term expiring on September 1, 2014, must meet the eligibility criteria set forth in California Revenue and Taxation Code, Section 1624.05. 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 4, 2017.

Vacant seat 7 (Alternate Member), succeeding Richard Lee, term expiring on September 1, 2014, must meet the eligibility criteria set forth in California Revenue and Taxation Code, Section 1624.05. 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 4, 2017.

Vacant seat 8 (Alternate Member), succeeding Dona Crowder, resigned, must meet the eligibility criteria set forth in California Revenue and Taxation Code, Section 1624.05. 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 the unexpired portion of a three-year term ending September 7, 2015.

Report: None.

Sunset Date: None.

Additional information relating to the Assessment Appeals Board No. 1 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 Form 700, Statement of Economic Interests. Applications will not be considered if a copy of 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 26, 2014

San Francisco BOARD OF SUPERVISORS

Date Printed:

September 26, 2014

Date Established:

December 24, 1998

Active

ASSESSMENT APPEALS BOARD NO. 1

Contact and Address:

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

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. 1 consists of eight (8) members (five (5) regular members, and three (3) 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 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

San Francisco BOARD OF SUPERVISORS

officers. The Clerk shall designate members to act as hearing officers for particular applications using a rotating system designed to assure that all members with the same priority level have an equal opportunity over time to participate as hearing officers. The Clerk shall designate hearing 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. 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. 1 shall have jurisdiction to hear applications for reduction affecting any property on the secured or unsecured rolls without limitation. In addition, the Clerk shall exclusively assign to Assessment Appeals Board No. 1 any application for reduction that involves real property located all or in apart within Assessor's Block Nos. 1-876 or 3701-3899, not including residential property consisting of four units or less; a possessory interest; or property on the secured or unsecured roll assessed at \$50,000,000 or more.

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.