

File No. 150057

Committee Item No. 4

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

# COMMITTEE/BOARD OF SUPERVISORS

## AGENDA PACKET CONTENTS LIST

Committee: Rules Committee

Date February 26, 2015

Board of Supervisors Meeting

Date \_\_\_\_\_

### Cmte Board

- Motion
- Resolution
- Ordinance
- Legislative Digest
- Budget and Legislative Analyst Report
- Youth Commission Report
- Introduction Form
- Department/Agency Cover Letter and/or Report
- Memorandum of Understanding (MOU)
- Grant Information Form
- Grant Budget
- Subcontract Budget
- Contract/Agreement
- Form 126 - Ethics Commission
- Award Letter
- Application
- Form 700
- Vacancy Notice
- Information Sheet
- Public Correspondence

### OTHER (Use back side if additional space is needed)

- Resume \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Completed by: Alisa Somera Date February 20, 2015

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

1 [Reappointment, Historic Preservation Commission - Richard Johns]

2

3 **Motion approving/rejecting the Mayor’s nomination for reappointment of Richard Johns**  
4 **to the Historic Preservation Commission, Seat No. 4, for the unexpired portion of a**  
5 **four-year term ending December 31, 2018.**

6

7 WHEREAS, Pursuant to Charter, Section 4.135, the Mayor has submitted a  
8 communication notifying the Board of Supervisors of the nomination of Richard Johns to the  
9 Historic Preservation Commission, received by the Clerk of the Board on January 21, 2015;  
10 and

11 WHEREAS, The Board of Supervisors has the authority to hold a public hearing and  
12 vote on the reappointment within 60 days following transmittal of the Mayor’s Notice of  
13 Appointment, and the failure of the Board to act on the nomination within the 60 day time  
14 period shall result in the nominee being deemed approved; now, therefore, be it

15 MOVED, That the Board of Supervisors hereby approves/rejects the Mayor’s  
16 nomination for reappointment of Richard Johns to the Historic Preservation Commission, Seat  
17 No. 4, for the unexpired portion of a four-year term ending December 31, 2018.

18

19

20

21

22

23

24

25

OFFICE OF THE MAYOR  
SAN FRANCISCO



orig: reg clerk c: COB, Leg Dep,  
Dep. city Atty, Rules clerk,  
EDWIN M. LEE,  
MAYOR  
c: pager, AC File

January 21, 2015

Angela Calvillo  
Clerk of the Board, Board of Supervisors  
San Francisco City Hall  
1 Carlton B. Goodlett Place  
San Francisco, CA 94102

RECEIVED  
BOARD OF SUPERVISORS  
SAN FRANCISCO  
2015 JAN 21 PM 4:33  
✓

Dear Ms. Calvillo,

Pursuant to Charter Section 4.135, I hereby make the following nominations for the Historic Preservation Commission:

Andrew Wolfram, Seat 2, for a term ending December 31, 2018

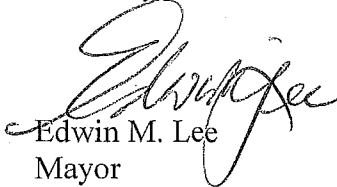
Richard Johns, Seat 4, for a term ending December 31, 2018

Karl Hasz, Seat 6, for a term ending December 31, 2018

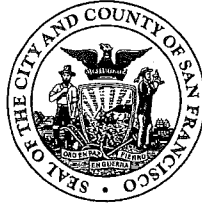
I am confident that Mr. Wolfram, Mr. Johns, and Mr. Hasz, all CCSF electors, will continue to serve our community well. Attached are their qualifications to serve, which demonstrates how these nominations represent the communities of interest, neighborhoods and diverse populations of the City and County of San Francisco.

I encourage your support and am pleased to advise you of these nominations.

Sincerely,

  
Edwin M. Lee  
Mayor

OFFICE OF THE MAYOR  
SAN FRANCISCO



EDWIN M. LEE  
MAYOR

### Notice of Appointment

January 21, 2015

San Francisco Board of Supervisors  
City Hall, Room 244  
1 Carlton B. Goodlett Place  
San Francisco, California 94102

RECEIVED  
BOARD OF SUPERVISORS  
SAN FRANCISCO  
2015 JAN 21 PM 4:33  
M

Honorable Board of Supervisors:

Pursuant to Charter Section 4.135, I hereby make the following nominations for the Historic Preservation Commission:

Andrew Wolfram, Seat 2, for a term ending December 31, 2018

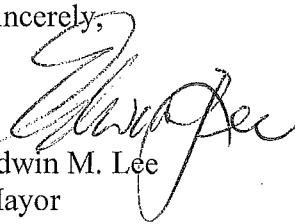
Richard Johns, Seat 4, for a term ending December 31, 2018

Karl Hasz, Seat 6, for a term ending December 31, 2018

I am confident that Mr. Wolfram, Mr. Johns, and Mr. Hasz, all CCSF electors, will continue to serve our community well. Attached are their qualifications to serve, which demonstrates how these nominations represent the communities of interest, neighborhoods and diverse populations of the City and County of San Francisco.

I encourage your support and am pleased to advise you of these nominations.

Sincerely,

  
Edwin M. Lee  
Mayor

## **Richard Johns Resume**

### **Commissioner**

**San Francisco Historic Preservation Commission**

January 2011 – Present (4 years 1 month)

The San Francisco Historic Preservation Commission is a Charter commission that oversees designation of historic districts and landmarks in San Francisco, and approves exterior modifications to buildings in those districts or that have been landmarked. I am not employed by the Historic Preservation Commission.

### **Owner**

**Law Offices of Richard S. E. Johns**

2004 – Present (11 years)

### **President**

**San Francisco Museum & Historical Society**

2006 – 2010 (4 years)

### **President**

**San Francisco Museum & Historical Society**

2005 – 2009 (4 years)

### **Owner**

**Kipperman & Johns**

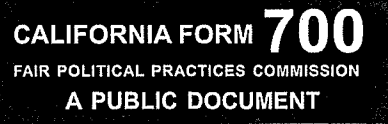
1987 – 2006 (19 years)

This was a law firm engaged in transactional and real estate advice, and business litigation.

### **Attorney**

**Furth Fahrner & Mason**

1976 – 1984 (8 years)



STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Received Official Use Only

E-Filed 03/30/2014 20:58:46 Filing ID: 150945412

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE) Johns, 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 Historic Preservation Commission Commissioner

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, 2013, through December 31, 2013 Leaving Office: Date Left The period covered is January 1, 2013, through the date of leaving office. Assuming Office: Date assumed Candidate: Election Year and office sought, if different than Part 1:

4. Schedule Summary

Check applicable schedules or "None." Total number of pages including this cover page: 8 Schedule A-1 - Investments - schedule attached Schedule A-2 - Investments - schedule attached Schedule B - Real Property - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule D - Income - Gifts - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached 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 94103 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.

Date Signed 03/30/2014 Signature Richard Johns (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.

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name <u>Johns, Richard</u>
--

▶ NAME OF BUSINESS ENTITY  
IBM

GENERAL DESCRIPTION OF THIS BUSINESS  
computers

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

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

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

▶ NAME OF BUSINESS ENTITY  
WalMart Stores debenture due 6/1/13

GENERAL DESCRIPTION OF THIS BUSINESS  
retail stores

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

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 06 / 01 / 13  
 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: \_\_\_\_\_

# 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 \_\_\_\_\_

Johns, Richard \_\_\_\_\_

**▶ 1. BUSINESS ENTITY OR TRUST**

Eureka Trust 2000  
Name

San Francisco, CA 94118  
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 <input type="checkbox"/> \$0 - \$1,999 <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	IF APPLICABLE, LIST DATE: _____ / _____ / _____ 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

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

None  
Helen King and Joanne Samples  
 \_\_\_\_\_  
Jeffrey Eisenberg and Melinda Aquino  
 \_\_\_\_\_  
Jason Kirmse and Kate Baron  
 \_\_\_\_\_

**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
 INVESTMENT                   REAL PROPERTY

ETFs and Mutual Funds  
 Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property  
security investments  
 \_\_\_\_\_  
 Description of Business Activity or City or Other Precise Location of Real Property  
 \_\_\_\_\_

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

NATURE OF INTEREST  
 Property Ownership/Deed of Trust     Stock     Partnership

Leasehold \_\_\_\_\_ Yrs. remaining     Other ETFs and Mutual Funds

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

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

**▶ 1. BUSINESS ENTITY OR TRUST**

Law Offices of Richard S.E. Johns  
Name

San Francisco, CA 94104  
Address (Business Address Acceptable)

Check one  
 Trust, go to 2     Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

Law Practice

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

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

YOUR BUSINESS POSITION owner

**▶ 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  
Coudert Plan Oversight  
 \_\_\_\_\_  
Cary Collins  
 \_\_\_\_\_  
Vijay Kumar  
 \_\_\_\_\_

**▶ 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  
San Francisco  
 \_\_\_\_\_  
 Description of Business Activity or City or Other Precise Location of Real Property  
 \_\_\_\_\_

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

NATURE OF INTEREST  
 Property Ownership/Deed of Trust     Stock     Partnership

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

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



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

<b>CALIFORNIA FORM 700</b>
<small>FAIR POLITICAL PRACTICES COMMISSION</small>
Name _____
Johns, Richard _____

**▶ 1. BUSINESS ENTITY OR TRUST**

Richard Johns Profit Share Plan and Trust  
 Name  
 San Francisco, CA 94118  
 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 <input type="checkbox"/> \$0 - \$1,999 <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	IF APPLICABLE, LIST DATE: _____ / _____ / _____ ACQUIRED                      DISPOSED
NATURE OF INVESTMENT <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> _____ Other	
YOUR BUSINESS POSITION _____	

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

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

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

None  
 ETFs and Mutual Funds  
 \_\_\_\_\_  
 \_\_\_\_\_

**▶ 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 <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	IF APPLICABLE, LIST DATE: _____ / _____ / _____ 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

**▶ 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 <input type="checkbox"/> \$0 - \$1,999 <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	IF APPLICABLE, LIST DATE: _____ / _____ / _____ ACQUIRED                      DISPOSED
NATURE OF INVESTMENT <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> _____ Other	
YOUR BUSINESS POSITION _____	

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

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

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

None  
 \_\_\_\_\_  
 \_\_\_\_\_

**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
 INVESTMENT                       REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property  
 \_\_\_\_\_

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

FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	IF APPLICABLE, LIST DATE: _____ / _____ / _____ 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 A-2

### Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

<b>CALIFORNIA FORM 700</b>
FAIR POLITICAL PRACTICES COMMISSION
Name _____
Johns, Richard

**▶ 1. BUSINESS ENTITY OR TRUST**

Eureka Trust 2000 (CONTINUATION)  
 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 <input type="checkbox"/> \$0 - \$1,999 <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	IF APPLICABLE, LIST DATE: _____ / _____ / _____ ACQUIRED                      DISPOSED
NATURE OF INVESTMENT <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> _____ Other	
YOUR BUSINESS POSITION _____	

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

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

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

None

\_\_\_\_\_

\_\_\_\_\_

**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
 INVESTMENT                   REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property  
 rental unit

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

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input checked="" type="checkbox"/> Over \$1,000,000	_____ / _____ / _____ ACQUIRED                      DISPOSED
NATURE OF INTEREST <input checked="" type="checkbox"/> Property Ownership/Deed of Trust <input type="checkbox"/> Stock <input type="checkbox"/> Partnership	
<input type="checkbox"/> Leasehold _____ Yrs. remaining <input type="checkbox"/> Other _____	
<input checked="" type="checkbox"/> Check box if additional schedules reporting investments or real property are attached	

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

**▶ 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 <input type="checkbox"/> \$0 - \$1,999 <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	IF APPLICABLE, LIST DATE: _____ / _____ / _____ ACQUIRED                      DISPOSED
NATURE OF INVESTMENT <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> _____ Other	
YOUR BUSINESS POSITION _____	

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

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

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

None

\_\_\_\_\_

\_\_\_\_\_

**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
 INVESTMENT                   REAL PROPERTY

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

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

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	_____ / _____ / _____ ACQUIRED                      DISPOSED
NATURE OF INTEREST <input type="checkbox"/> Property Ownership/Deed of Trust <input type="checkbox"/> Stock <input type="checkbox"/> Partnership	
<input type="checkbox"/> Leasehold _____ Yrs. remaining <input type="checkbox"/> Other _____	
<input type="checkbox"/> Check box if additional schedules reporting investments or real property are attached	

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
Johns, Richard

1. BUSINESS ENTITY OR TRUST

Eureka Trust 2000 (CONTINUATION)
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 \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000

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

None

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
INVESTMENT REAL PROPERTY
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
rental units
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 Yrs. remaining Other
Check box if additional schedules reporting investments or real property are attached

1. BUSINESS ENTITY OR TRUST

Name
Address (Business Address Acceptable)
Check one
Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF 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 \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000

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

None

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
INVESTMENT REAL PROPERTY
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
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 Yrs. remaining Other
Check box if additional schedules reporting investments or real property are attached

Comments:

Additional Single Sources of Income of \$10,000 or more for Law Offices of Richard S.E. Johns  
Steven Kipperman Law Corp.

# SCHEDULE C

## Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
Johns, Richard

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
Willie Brown Institute

ADDRESS (Business Address Acceptable)  
San Francisco, CA 94105

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Non Profit

YOUR BUSINESS POSITION  
None

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  
 Loan repayment       Partnership  
 Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)  
 Commission or  Rental Income, list each source of \$10,000 or more  
  
 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  
 Loan repayment       Partnership  
 Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)  
 Commission or  Rental Income, list each source of \$10,000 or more  
  
 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      TERM (Months/Years)  
\_\_\_\_\_ %       None      \_\_\_\_\_

SECURITY FOR LOAN  
 None       Personal residence  
 Real Property \_\_\_\_\_  
Street address  
\_\_\_\_\_ City

Guarantor \_\_\_\_\_  
 Other \_\_\_\_\_  
(Describe)

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



## Ellen Joslin Johnck, RPA

Environmental and Cultural Resources Permitting, Planning and Management

February 9, 2015

Ms. Nicole Wheaton  
Office of The Honorable Mayor Ed Lee  
City Hall, Room 400  
San Francisco, CA 94102

Subject: Recommendation of Karl Hasz, Richard S.E. Johns and Andrew Wolfram  
Reappointment to the San Francisco Historic Preservation Commission

Dear Nicole,

It is my understanding that these three commissioners' terms on the Historic Preservation Commission are expiring, and that they are being considered for reappointment.

I highly recommend that current Commissioners Hasz, Johns and Wolfram be reappointed. Since my appointment to the Commission two years ago, I have come to know them as highly skilled professional colleagues on the Commission. They are a treasure of expertise, knowledge and diplomacy—all essential qualities for the HPC.

As you know, it is very important that Commission members work effectively as a team, and these three are superb team members as leaders and who work collaboratively within our group of seven. It is an honor to be seated with them on the Commission. They are serving the citizens of San Francisco admirably in achieving preservation goals while managing change to ensure economic progress for our beautiful city.

Thank you for your consideration.

Sincerely yours,

Ellen J. Johnck

San Francisco  
BOARD OF SUPERVISORS

Date Printed: February 3, 2015

Date Established: November 1, 2008

Active

**HISTORIC PRESERVATION COMMISSION**

**Contact and Address:**

Jonas P. Ionin  
Planning Department  
1650 Mission Street, 4th Floor  
San Francisco, CA 94103

Phone: (415) 558-6407

Fax: (415) 558-6409

Email: [jonas.ionin@sfgov.org](mailto:jonas.ionin@sfgov.org)

**Authority:**

Charter Amendment, Prop. J, November 4, 2008 election.

**Board Qualifications:**

Proposition J, on the November 4, 2008 ballot, amended the Charter to create an independent Historic Preservation Commission, which shall advise the City on historic preservation matters, participate in processes that involve historic or cultural resources, and take such other actions concerning historic preservation as may be prescribed by ordinance. The proposed Charter amendment would end the service of all current members of the Landmarks Preservation Advisory Board as of December 31, 2008. The Commission shall have the authority to recommend approval, disapproval, or modification of landmark designations and historic district designations under the Planning Code to the Board of Supervisors. The Planning Commission would have 45 days to comment on the HPC recommendation regarding landmarks designations and provide comments to the Board of Supervisors.

Certain matters of the Board of Supervisors would be required to be referred to the HPC prior to passage by the Board of Supervisors, including ordinances and resolutions concerning historic preservation issues of historic resources, redevelopment project plans and waterfront plans.

The Historic Preservation Commission shall consist of seven members nominated by the Mayor and subject to approval by a majority of the Board of Supervisors. The original appointments shall have four members with four-year terms and three members with two-year terms as follows: the odd-numbered seats shall be for 4-year terms and the even-numbered seats shall be for 2-year terms. After the expiration of the original terms, all appointments shall be four-year terms, provided however, that a member may holdover until a successor has been nominated by the Mayor and approved by the Board of Supervisors. There shall be no limit on the number of terms a member may serve.

San Francisco  
BOARD OF SUPERVISORS

Within 60 days of the expiration of a term or other vacancy the Mayor shall nominate a qualified person to fill the vacant seat subject to approval by a majority of the Board of Supervisors who shall hold a public hearing and vote on the nomination within 60 days of the Mayor's transmittal of the nomination to the Clerk of the Board of Supervisors. If the Mayor fails to make such nomination within 60 days, the nomination may be made by the President of the Board of Supervisors, subject to the approval of a majority of the Board of Supervisors

Members of this Commission shall be persons specially qualified by reason of interest, competence, knowledge, training and experience in the historic, architectural, aesthetic, and cultural traditions of the City, interested in the preservation of its historic structures, sites and areas, and residents of the City.

Seats 1 and 2 must be licensed architects meeting the Secretary of the Interior's Professional Qualifications Standards for historic architecture.

Seat 3 must be an architectural historian meeting the Secretary of the Interior's Professional Qualifications Standards for architectural history with specialized training and/or demonstrable experience in North American or Bay Area architectural history.

Seat 4 must be a historian meeting the Secretary of the Interior's Professional Qualifications Standards for history with specialized training and/or demonstrable experience in North American or Bay Area history.

Seat 5 must be a historic preservation professional or professional in a field such as law, land use, community planning or urban design with specialized training and/or demonstrable experience in historic preservation or historic preservation planning.

Seat 6 shall be specially qualified in one of the following fields or in one of the fields set forth for Seats 1, 2, or 3: (a) - A professional archeologist meeting the Secretary of the Interior's Professional Qualifications Standards for Archeology; (b) - A real estate professional or contractor who has demonstrated a special interest, competence, experience, and knowledge in historic preservation; (c) - A licensed structural engineer with at least four years of experience in seismic and structural engineering principals applied to historic structures; or (d) - A person with training and professional experience with materials conservation.

Seat 7 shall be an at large seat subject to the minimum qualifications set forth above.

The Commission shall be staffed by the Planning Department.

Sunset: None