

File No. 100998

Committee Item No. 1

Board Item No. 25

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Rules

Date August 5, 2010

Board of Supervisors Meeting

Date August 10, 2010

Cmte Board

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

OTHER

(Use back side if additional space is needed)

- | | | |
|-------------------------------------|-------------------------------------|-----------------|
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <u>Form 700</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ |

Completed by: Linda Wong

Date July 30, 2010

Completed by: Alisa Somera

Date August 9, 2010

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

1 [Reappointment, Entertainment Commission - John Newlin]

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Motion approving the Mayor’s nomination for reappointment of John Newlin to the Entertainment Commission, for the term ending July 1, 2014.

WHEREAS, Pursuant to Charter Section 4.117, the Mayor has submitted a communication notifying the Board of Supervisors of the nomination of John Newlin to the Entertainment Commission, received by the Clerk of the Board on July 20, 2010; and

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

MOVED, That the Board of Supervisors hereby approves the Mayor’s nomination for reappointment of John Newlin to the Entertainment Commission, for the term ending July 1, 2014.

FILES UNIT
Leg. Director
CJS
C page

OFFICE OF THE MAYOR
SAN FRANCISCO



GAVIN NEWSOM

Notice of Appointment

July 20, 2010

Files 100998
100999

RECEIVED
BOARD OF SUPERVISORS
SAN FRANCISCO
2010 JUL 20 PM 2:20
BY _____ pc

Honorable Board of Supervisors:

Pursuant to Charter Section 4.117, I hereby nominate John Newlin for reappointment to the San Francisco Entertainment Commission.

Mr. Newlin is nominated for reappointment to fill his same seat. This term will expire July 1, 2014.

I am confident that Mr. Newlin will continue to serve our community well. Attached are his qualifications to serve, which demonstrate how the appointment represents 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 this appointment.

Gavin Newsom
Mayor

OFFICE OF THE MAYOR
SAN FRANCISCO



GAVIN NEWSOM

Kate Clark
Leg. Director
COB
C. Page
BoS-11
CA

July 20, 2010

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

RECEIVED
BOARD OF SUPERVISORS
SAN FRANCISCO
2010 JUL 20 PM 2:20
BY _____
QR

Dear Ms. Calvillo:

Pursuant to Charter Section 4.117, I hereby nominate John Newlin for reappointment to the San Francisco Entertainment Commission.

Mr. Newlin is nominated for reappointment to fill his same seat. This term will expire July 1, 2014.

Please see the attached resume which will illustrate that Mr. Newlin's qualifications allow him to represent the communities of interest, neighborhoods and diverse populations of the City and County.

Should you have any questions, please contact my Director of Appointments, Matthew Goudeau at 415-554-6674.

Sincerely,

A large, stylized handwritten signature in black ink, appearing to read "Gavin Newsom".

Gavin Newsom
Mayor

John Newlin
— **Arguello Blvd.**
San Francisco, CA 94122
(415) —

Work Experience:

San Francisco Police Department 1970-2004

Rank of Captain

Commanded Park and Mission Stations as well as Narcotics, Investigations, Traffic and Juvenile Divisions. Worked closely with community and business groups to reduce crime and improve the quality of life in San Francisco.

Department of Parking and Traffic 1992-1996

Executive Director: Set traffic and parking policy for San Francisco with an emphasis on congestion management. DPT comprised of approximately 1,000 employees in various divisions including Traffic Engineering, Enforcement, Citation and Hearings, Accounting, and Contracts.

Education:

Masters Degree, Public Administration
Golden Gate University, SF circa 1980

Bachelors Degree, Economics and Business Administration
Saint Mary's College, Moraga 1969

Personal:

Married
Two daughters, 31 and 29
San Francisco resident since 1970

References: Bevan Dufty, SF Supervisor; Buck Delventhal, SF City Attorney's Office;
Julie Rosenberg, Manger MTA Hearing Division



STATEMENT OF ECONOMIC INTERESTS

Date Received Official Use Only

COVER PAGE

FILED

A Public Document

10 MAR 30 PM 3:41

Please type or print in ink.

NAME (LAST) <u>NEWLIN</u>	(FIRST) <u>JOHN</u>	(MIDDLE) <u>E</u>	ET DAY TIME TELEPHONE NUMBER [REDACTED]
MAILING ADDRESS (Business Address Acceptable) [REDACTED]	STREET <u>SF</u>	CITY <u>CA</u>	STATE <u>94122</u>
		ZIP CODE	OPTIONAL: E-MAIL ADDRESS

1. Office, Agency, or Court

Name of Office, Agency, or Court:
Entertainment Commission

Division, Board, District, if applicable:

Your Position:
Commissioner

► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: _____

Position: _____

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

State

County of SF

City of SF

Multi-County _____

Other _____

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

Assuming Office/Initial Date: ____/____/____

Annual: The period covered is January 1, 2009, through December 31, 2009.

-or-

The period covered is ____/____/____, through December 31, 2009.

Leaving Office Date Left: ____/____/____ (Check one)

The period covered is January 1, 2009, through the date of leaving office.

-or-

The period covered is ____/____/____, through the date of leaving office.

Candidate Election Year: _____

4. Schedule Summary

► Total number of pages including this cover page: _____

► Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 Yes - schedule attached
Investments (Less than 10% Ownership)

Schedule A-2 Yes - schedule attached
Investments (10% or Greater Ownership)

Schedule B Yes - schedule attached
Real Property

Schedule C Yes - schedule attached
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)

Schedule D Yes - schedule attached
Income - Gifts

Schedule E Yes - schedule attached
Income - Gifts - Travel Payments

-or-

No reportable interests on any schedule

5. Verification

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

Date Signed: 3/18/2010

Signature: [REDACTED]

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 Newlin

NAME OF BUSINESS ENTITY
INTEL

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Computer chip

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

IF APPLICABLE, LIST DATE:
 _____/_____/09 _____/_____/09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
WALGREENS

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Pharmacy

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

IF APPLICABLE, LIST DATE:
 _____/_____/09 _____/_____/09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
Janus 20

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Mutual Fund

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

IF APPLICABLE, LIST DATE:
 _____/_____/09 _____/_____/09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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

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

IF APPLICABLE, LIST DATE:
 _____/_____/09 _____/_____/09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
JOHNSON & JOHNSON

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
DRUG

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

IF APPLICABLE, LIST DATE:
 _____/_____/09 _____/_____/09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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

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

IF APPLICABLE, LIST DATE:
 _____/_____/09 _____/_____/09
 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 <u>Newton</u>	

1. BUSINESS ENTITY OR TRUST

Name _____

Address (Business Address Acceptable) _____

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

GENERAL DESCRIPTION OF BUSINESS ACTIVITY			
FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:		
<input type="checkbox"/> \$2,000 - \$10,000	___/___/09	___/___/09	
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED	DISPOSED	
<input type="checkbox"/> \$100,001 - \$1,000,000			
<input type="checkbox"/> Over \$1,000,000			
NATURE OF INVESTMENT			
<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Other _____			
YOUR BUSINESS POSITION _____			

1. BUSINESS ENTITY OR TRUST

Name _____

Address (Business Address Acceptable) _____

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

GENERAL DESCRIPTION OF BUSINESS ACTIVITY			
FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:		
<input type="checkbox"/> \$2,000 - \$10,000	___/___/09	___/___/09	
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED	DISPOSED	
<input type="checkbox"/> \$100,001 - \$1,000,000			
<input type="checkbox"/> Over \$1,000,000			
NATURE OF INVESTMENT			
<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <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)

<input type="checkbox"/> \$0 - \$499	<input type="checkbox"/> \$10,001 - \$100,000
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> OVER \$100,000
<input type="checkbox"/> \$1,001 - \$10,000	

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

<input type="checkbox"/> \$0 - \$499	<input type="checkbox"/> \$10,001 - \$100,000
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> OVER \$100,000
<input type="checkbox"/> \$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)

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

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

Check one box:
 INVESTMENT REAL PROPERTY

Name of Business Entity or
 Street Address or Assessor's Parcel Number 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	___/___/09	___/___/09	
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED	DISPOSED	
<input type="checkbox"/> \$100,001 - \$1,000,000			
<input type="checkbox"/> Over \$1,000,000			

NATURE OF INTEREST

Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Yrs. remaining Other _____

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

Check one box:
 INVESTMENT REAL PROPERTY

Name of Business Entity or
 Street Address or Assessor's Parcel Number 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	___/___/09	___/___/09	
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED	DISPOSED	
<input type="checkbox"/> \$100,001 - \$1,000,000			
<input type="checkbox"/> Over \$1,000,000			

NATURE OF INTEREST

Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Yrs. remaining Other _____

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

Comments: _____

SCHEDULE B
Interests in Real Property
 (Including Rental Income)

Name
NEWLIN

▶ STREET ADDRESS OR PRECISE LOCATION
30-28-26 HUGO ST

CITY
SF, CA 94122

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 1/09 DISPOSED 1/09

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.

▶ STREET ADDRESS OR PRECISE LOCATION
830 STANYAN

CITY
SF, CA 94117

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 1/09 DISPOSED 1/09

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.

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER* _____

ADDRESS (Business Address Acceptable) _____

BUSINESS ACTIVITY, IF ANY, OF LENDER _____

INTEREST RATE _____ TERM (Months/Years) _____
 _____% None

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

NAME OF LENDER* _____

ADDRESS (Business Address Acceptable) _____

BUSINESS ACTIVITY, IF ANY, OF LENDER _____

INTEREST RATE _____ TERM (Months/Years) _____
 _____% None

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

Comments: _____

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name
NEWLIN

▶ STREET ADDRESS OR PRECISE LOCATION
1215 - 1217 Arguello Blvd

CITY
SAN FRANCISCO, CA

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

IF APPLICABLE, LIST DATE:
 _____ / _____ / 09
 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

[REDACTED]

▶ STREET ADDRESS OR PRECISE LOCATION
1219 - 1221 Arguello

CITY
SF, CA

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

IF APPLICABLE, LIST DATE:
 _____ / _____ / 09
 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.

[REDACTED]

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER* _____

ADDRESS (Business Address Acceptable) _____

BUSINESS ACTIVITY, IF ANY, OF LENDER _____

INTEREST RATE _____ % None TERM (Months/Years) _____

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

NAME OF LENDER* _____

ADDRESS (Business Address Acceptable) _____

BUSINESS ACTIVITY, IF ANY, OF LENDER _____

INTEREST RATE _____ % None TERM (Months/Years) _____

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

Comments: _____

SCHEDULE C

Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name Newton

1. INCOME RECEIVED	1. INCOME RECEIVED
NAME OF SOURCE OF INCOME <u>City & County SF Retirement</u> ADDRESS (Business Address Acceptable) <hr/> BUSINESS ACTIVITY, IF ANY, OF SOURCE <hr/> YOUR BUSINESS POSITION <u>Retired Police Capt</u>	NAME OF SOURCE OF INCOME <u>CCSF DPT MTA</u> ADDRESS (Business Address Acceptable) <u>City Hall</u> BUSINESS ACTIVITY, IF ANY, OF SOURCE <hr/> YOUR BUSINESS POSITION <u>Hearing Officer</u>
GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input checked="" type="checkbox"/> OVER \$100,000	GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Sale of _____ <small style="margin-left: 150px;">(Property, car, boat, etc.)</small> <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more <hr/> <input type="checkbox"/> Other _____ <small style="margin-left: 150px;">(Describe)</small>	CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Sale of _____ <small style="margin-left: 150px;">(Property, car, boat, etc.)</small> <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more <hr/> <input type="checkbox"/> Other _____ <small style="margin-left: 150px;">(Describe)</small>

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: <hr/> ADDRESS (Business Address Acceptable) <hr/> BUSINESS ACTIVITY, IF ANY, OF LENDER <hr/> HIGHEST BALANCE DURING REPORTING PERIOD <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000	INTEREST RATE TERM (Months/Years) _____% <input type="checkbox"/> None _____ SECURITY FOR LOAN <input type="checkbox"/> None <input type="checkbox"/> Personal residence <input type="checkbox"/> Real Property _____ <small style="margin-left: 150px;">Street address</small> _____ <small style="margin-left: 150px;">City</small> <input type="checkbox"/> Guarantor _____ <input type="checkbox"/> Other _____ <small style="margin-left: 150px;">(Describe)</small>
--	---

Comments: _____

San Francisco
BOARD OF SUPERVISORS

Date Printed: July 28, 2010

Date Established: November 5, 2002

Active

ENTERTAINMENT COMMISSION

Contact and Address:

Robert Davis Executive Director
Administrative Services
City Hall, Room 453
San Francisco, CA 94102

Phone: (415) 554-7793

Fax: (415) 554-7934

Email:

Authority:

Charter Section 4.117 (per Prop F. Election November 2002) and Ordinance 164-02

Board Qualifications:

The Entertainment Commission shall consist of 7 members comprised of 3 members appointed by the Board of Supervisors and 4 members nominated by the Mayor.

Each nomination by the Mayor shall be subject to approval by the Board of Supervisors and shall be the subject of a public hearing and vote within 60 days. If the Board of Supervisors fails to act on a mayoral nomination within 60 days of the date the nomination is transmitted to the Clerk of the Board of Supervisors, the nominee shall be deemed approved.

Of the 4 members nominated by the Mayor, the Mayor shall nominate one member to represent the interests of City neighborhood associations or groups, one member to represent the interests of entertainment associations or groups, one member to represent the interests of the urban planning community, and one member to represent the interests of the law enforcement community.

Of the 3 members appointed by the Board of Supervisors, one member shall represent the interests of City neighborhood associations or groups, one member shall represent the interests of entertainment associations or groups and one member shall represent the interests of the public health community.

To stagger the terms the initial appointments to the commission shall be as follows: the Mayor nominates two members to serve terms of four years, one member to serve a term of three years

San Francisco
BOARD OF SUPERVISORS

and one member to serve a term of two years. Of the three remaining members, the Board of Supervisors shall appoint one member to serve a term of four years, one member to serve a term of three years and one member to serve a term of two years. All terms of initial appointees to the commission shall be deemed to commence upon the same date which shall be the date upon which the last of the seven initial appointees assumes office. Thereafter, all appointments and reappointments shall be for a term of four years.

The Entertainment Commission shall: 1) assist entertainment organizers and operators to apply for necessary permits; 2) promote responsible conduct; 3) promote the City's entertainment industry; 4) promote the use of City facilities; 5) foster harm reduction policies; 6) develop "good neighbor policies"; 7) mediate disputes between persons affected by entertainment events and establishments and the operators of such establishments; 8) issue entertainment related permits; 9) plan and coordinate City services for major events; 10) provide information regarding venues and services appropriate for events and functions ancillary to conventions.

Reports: Prepare and submit to the Mayor and Board of Supervisors within one year from July 6, 2002 and not less than five years thereafter a report analyzing the commission's effectiveness. Prepare and submit to the Mayor and Board of Supervisors an annual report by March 1st regarding its activities for the preceding year. Prepare and submit to the Mayor and Board of Supervisors within one year from July 6, 2002 and annually thereafter a report analyzing fee revenue.

Sunset Clause: None mentioned