

BOARD of SUPERVISORS



City Hall  
1 Dr. Carlton B. Goodlett Place, Room 244  
San Francisco 94102-4689  
Tel. No. (415) 554-5184  
Fax No. (415) 554-5163  
TDD/TTY No. (415) 544-5227

**Application for Boards, Commissions, Committees, & Task Forces**

Name of Board/Commission/Committee/Task Force: Citizens' General Obligation Bond Oversight Committee

Seat # (see Vacancy Notice for qualifications): 1

Full Name: Andrea Marmo Crawford

[Redacted] Zip Code: 94133

Occupation: CEO/Founder

Work Phone: 415.361.2981 Employer: A.M. Crawford, Inc.

Business Address: 870 Market Street, Suite 566 Zip Code: 94102

Business Email: andrea@amcrawfordinc.com Home Email: [Redacted]

**Pursuant to Charter, Section 4.101(a)(2), Boards and Commissions established by the Charter must consist of residents of the City and County of San Francisco who are 18 years of age or older (unless otherwise stated in the code authority). For certain appointments, the Board of Supervisors may waive the residency requirement.**

Check All That Apply:

Resident of San Francisco: Yes ☒ No ☐ If No, place of residence: \_\_\_\_\_

18 Years of Age or Older: Yes ☒ No ☐

**Pursuant to Charter, Section 4.101(a)(1), please state how your qualifications represent the communities of interest, neighborhoods, and the diversity in ethnicity, race, age, sex, sexual orientation, gender identity, types of disabilities, and any other relevant demographic qualities of the City and County of San Francisco:**

I have lived in San Francisco for over 10 years (District 3), am married and have 2 children who attend SFUSD schools. As a family, we spend a great deal of time in public places funded by various bond measures - all projects that the CGOBOC oversees or has overseen in the past. Joe DiMaggio Park, John McLaren Park, and anywhere along the Embarcadero Waterfront are favorites. I founded a small business that is based in San Francisco. Our offices are in the historic Flood Building (District 6). My firm is a designated Disadvantaged Business Enterprise (DBE); a Local/Micro Business Enterprise (San Francisco); and certified Women Owned Small Business (WOSB) by the United States Small Business Administration.

**Business and/or Professional Experience:**

My background is in fundraising for nonprofits and government entities, and for years my colleagues and I have provided grants development (writing, editing) support to our clients. I have helped develop countless budgets and project plans for large capital projects. My experience kind of stops at the proposal, right at the point of project funding, or a few months or years in when its time to write a report on the project. I'm VERY interested in learning more about what happens in between - how large government infrastructure projects move forward AFTER they are funded. I think serving on the CGOBOC is a good way to learn more about this. I also enjoy reading CGOBOC committee reports and audits and think it would be interesting to participate actively in that process. I would love to visit more parks, public works projects, etc. in San Francisco and meet the people working on them.

**Civic Activities:**

Over the past few years I have been very focused on keeping my business moving forward midst some pretty difficult economic conditions. My civic activities during 2019-2021 have been limited. Before that, however, I served on Garfield Elementary's PTO (both of my sons were students at the time); I served on the board of the Jesuit Retreat Center of Los Altos and still serve on the capital campaign committee for that organization; and I was a founding board member of the Greater Bay Area Chapter of the Grant Professionals Association, a professional organization based in Kansas City.

Have you attended any meetings of the body to which you are applying? Yes ☒ No ☐

An appearance before the Rules Committee may be required at a scheduled public hearing, prior to the Board of Supervisors considering the recommended appointment. Applications should be received ten (10) days prior to the scheduled public hearing.

Date: 6 January 2022 Applicant's Signature (required): Andrea Marmo Crawford  
(Manually sign or type your complete name.  
NOTE: By typing your complete name, you are  
hereby consenting to use of electronic signature.)

Please Note: Your application will be retained for one year. Once completed, this form, including all attachments, become public record.

**FOR OFFICE USE ONLY:**

Appointed to Seat #: \_\_\_\_\_ Term Expires: \_\_\_\_\_ Date Vacated: \_\_\_\_\_

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

Date Initial Filing Received  
Filing Official Use Only

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Crawford Andrea Marmo

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

Agency Name (Do not use acronyms)

Citizens' General Obligation Bond Oversight Committee

Division, Board, Department, District, if applicable

Office of the Controller/City and County of San Francisco

Your Position

Application for Seat #1

► 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, Retired Judge, Pro Tem Judge, or Court Commissioner  
(Statewide Jurisdiction)

☐ Multi-County \_\_\_\_\_

☒ County of San Francisco

☒ City of San Francisco

☐ Other \_\_\_\_\_

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

☐ Annual: The period covered is January 1, 2021, through  
December 31, 2021.

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through  
December 31, 2021.

☐ Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one circle.)

☐ The period covered is January 1, 2021, through the date of  
leaving office.

-or-

☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through  
the date of leaving office.

☐ Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_

☒ Candidate: Date of Election \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_

**4. Schedule Summary (must complete) ► Total number of pages including this cover page: 4**

**Schedules attached**

☐ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☒ Schedule A-2 - Investments - schedule attached

☐ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

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

-or-

☐ None - No reportable interests on any schedule

**5. Verification**

MAILING ADDRESS STREET  
(Business or Agency Address Recommended - Public Document)

870 Market Street, Suite 566

CITY

San Francisco

STATE

CA

ZIP CODE

94102

DAYTIME TELEPHONE NUMBER

(415) 361.2981

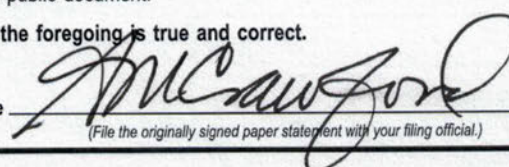
E-MAIL ADDRESS

andrea@amcrawfordinc.com

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

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

Date Signed 1/12/22  
(month, day, year)

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

Print

Clear



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

**1. BUSINESS ENTITY OR TRUST**

A.M. Crawford, Inc

Name

870 Market Street, Suite 566, San Francisco, CA 94102

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF THIS BUSINESS**

Fundraising and Philanthropic Counsel

**FAIR MARKET VALUE**

- ☐ \$0 - \$1,999  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☒ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/21  
ACQUIRED DISPOSED

**NATURE OF INVESTMENT**

☐ Partnership ☐ Sole Proprietorship ☒ Corporation

Other

YOUR BUSINESS POSITION CEO

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

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

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

☐ None or ☒ Names listed below

See Schedule A-2 Attachment List of Clients

**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**

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☒ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/21  
ACQUIRED DISPOSED

**NATURE OF INTEREST**

☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

☒ Leasehold 2  
Yrs. remaining

☐ Other

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

Comments:

**Filer's Verification**

Print Name Andrea Marmo Crawford

Office, Agency or Court San Francisco Citizens' General Obligation Bond Oversight Committee

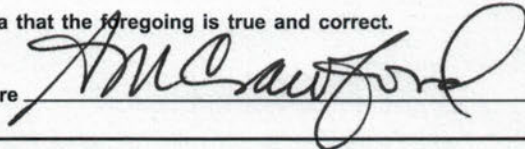
Statement Type ☐ 2021/2022 Annual ☐ \_\_\_\_\_ Annual ☐ Assuming ☐ Leaving ☒ Candidate  
(yr)

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 1/12/2022  
(month, day, year)

Filer's Signature



Print

Clear

**SCHEDULE A-2 - List of Income Sources >\$10K**  
**AM Crawford, Inc.**  
**January - December 2021**

---

Catholic Charities San Bernardino & Riverside Counties  
Electrical Training Alliance  
Electrical Training Alliance of Jacksonville  
Housing Matters  
Kepler's Literary Foundation  
LearnUp Centers  
Outward Bound California  
Outward Bound USA  
Partnership on AI  
Poplar Community Services District

Wednesday, Jan 12, 2022 05:19:22 PM GMT-8 - Accrual Basis



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

NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
<u>A.M. Crawford, Inc</u>	
ADDRESS (Business Address Acceptable) <u>870 Market Street, Suite 566, SF, CA 94102</u>	ADDRESS (Business Address Acceptable) _____
BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Fundraising and Philanthropic Counsel</u>	BUSINESS ACTIVITY, IF ANY, OF SOURCE _____
YOUR BUSINESS POSITION <u>CEO/Founder</u>	YOUR BUSINESS POSITION _____
GROSS INCOME RECEIVED <input type="checkbox"/> No Income - Business Position Only <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	GROSS INCOME RECEIVED <input type="checkbox"/> No Income - Business Position Only <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
CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input checked="" type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
<input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	<input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
<input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.)	<input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.)
<input type="checkbox"/> Loan repayment	<input type="checkbox"/> Loan repayment
<input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ (Describe)	<input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ (Describe)
<input type="checkbox"/> Other _____ (Describe)	<input type="checkbox"/> Other _____ (Describe)

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

**2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

\* You are not required to report loans from a commercial lending institution, 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*	INTEREST RATE
_____	_____ % <input type="checkbox"/> None
ADDRESS (Business Address Acceptable) _____	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER _____	<input type="checkbox"/> None <input type="checkbox"/> Personal residence
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	<input type="checkbox"/> Real Property _____ Street address _____ City _____
	<input type="checkbox"/> Guarantor _____
	<input type="checkbox"/> Other _____ (Describe)

**Filer's Verification**

Print Name Andrea Marmo Crawford Office, Agency or Court Citizens' General Obligation Bond Oversight

Statement Type ☐ 2021/2022 Annual ☐ \_\_\_\_\_ Annual ☐ Assuming ☐ Leaving ☒ Candidate  
(yr)

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 1/12/22 Filer's Signature [Signature]  
(month, day, year)

Print

Clear

**BOARD of SUPERVISORS**



City Hall  
1 Dr. Carlton B. Goodlett Place, Room 244  
San Francisco 94102-4689  
Tel. No. (415) 554-5184  
Fax No. (415) 554-5163  
TDD/TTY No. (415) 554-5227

**Application for Boards / Commissions / Committees / Task Forces  
INSTRUCTIONS AND APPLICATION**

San Francisco is a diverse City and County with a wide range of people and issues affecting it. In order to take advantage of the extensive experience and knowledge available throughout our communities, various Boards/Commissions/Committees/Task Forces have been established to bring that knowledge together. These groups and their membership requirements are established by legislation approved through the local, state, and/or federal government.

In addition to setting up the purpose and goals of the various groups, the governing legislation outlines the type of person - in terms of desirable skills and/or knowledge - who can contribute their knowledge and perspective. In this manner, a group of San Franciscans, who are representative of the City and County, can be active participants in addressing issues affecting the entire City and County.

If you are interested in serving the City and County of San Francisco, the following procedures are provided:

1. A list of vacancies and expected vacancies, with their qualifications, can be found at the Office of the Clerk of the Board of Supervisors, at the San Francisco Main Public Library, and online on the Board of Supervisors' website (<http://www.sfbos.org/vacancy>). Please review this list for positions of interest.
2. Submit an application ([http://www.sfbos.org/vacancy application](http://www.sfbos.org/vacancy_application))  
*(List all of the appropriate seat number(s) and/or category/categories for which you qualify. We request applications be received ten (10) days before the scheduled hearing.)*

Applicants may also need to submit a Form 700, Statement of Economic Interests (<https://www.fppc.ca.gov/Form700.html>), along with their application for all bodies listed in [Campaign and Governmental Conduct Code, Section 3.1-103\(a\)\(1\)](#).

3. If the seat(s) you are applying for is vacant and requires the Board of Supervisors' confirmation, the Rules Committee may schedule your application for review. Applicants should expect to appear before the Rules Committee to speak on their qualifications and answer questions during a public hearing.  
*(There are no set instructions on what you are expected to present to the Rules Committee; however, a brief description of how your qualifications distinguish you from other applicants, reasons for your interest in the subject, and/or a short summarization on why you would make a good candidate is appropriate.)*
4. The Rules Committee may or may not make a recommendation for appointment. If a recommendation is made by the Rules Committee, the recommendation is forwarded to the Board of Supervisors for approval. It generally takes approximately 15 days from the date the Rules Committee makes their recommendation, for the individual to become officially appointed.
5. Depending on the type of organization, a new appointee may need to take an Oath of Office.

If there are no vacancies, your application will be retained for one year. If any openings occur during this time, your application will be submitted to the Rules Committee for review.

If you have any further questions, please contact the Rules Committee Clerk at (415) 554-5184. If you require detailed information concerning the operations of a particular Board/Commission/Committee/Task Force, please contact the administering department directly.

(Applications must be submitted to [BOS-Appointments@sfgov.org](mailto:BOS-Appointments@sfgov.org) or to the mailing address listed above.)

BOARD of SUPERVISORS



City Hall  
1 Dr. Carlton B. Goodlett Place, Room 244  
San Francisco 94102-4689  
Tel. No. (415) 554-5184  
Fax No. (415) 554-5163  
TDD/TTY No. (415) 554-5227

**Application for Boards, Commissions, Committees, & Task Forces**

Name of Board/Commission/Committee/Task Force: Citizens' General Obligation Bond Oversight Committee

Seat # (Required - see Vacancy Notice for qualifications): 3

Full Name: Kate McGee

[Redacted] Zip Code: 94133  
Occupation: Urban Planning Consultant

Work Phone: 415.298.5219 Employer: EBO Strategy

Business Address: 2031 1/2 Powell Street Zip Code: 94133

Business Email: kate@ebo-strategy.com Home Email: [Redacted]

Pursuant to Charter, Section 4.101(a)(2), Boards and Commissions established by the Charter must consist of residents of the City and County of San Francisco who are 18 years of age or older (unless otherwise stated in the code authority). For certain appointments, the Board of Supervisors may waive the residency requirement.

Resident of San Francisco: Yes ☒ No ☐ If No, place of residence: \_\_\_\_\_

18 Years of Age or Older: Yes ☒ No ☐

**Pursuant to Charter, Section 4.101(a)(1), please state how your qualifications represent the communities of interest, neighborhoods, and the diversity in ethnicity, race, age, sex, sexual orientation, gender identity, types of disabilities, and any other relevant demographic qualities of the City and County of San Francisco:**

I am applying for the community organization seat (#3) on the Citizens' General Obligation Bond Oversight Committee. My active involvement in North Beach Neighbors, the community organization where I serve on the Planning and Zoning Committee, positions me well for this role. In this capacity, I have provided expertise on local land use, historic preservation, and state housing policy, ensuring that residents have the information they need to engage meaningfully in decisions that impact our community.

I immigrated to the United States in 2001 and have been committed to public service and community engagement ever since. I worked for the San Francisco Planning Department for 13 years, focusing on neighborhoods including the Bayview, Bernal Heights, Potrero Hill, Visitacion Valley, and SoMa. As a single mother for 15 years, I raised two boys in North Beach, balancing professional responsibilities with volunteer work that directly benefited the city's diverse communities. My experience includes distributing food to the homeless, organizing donation drives, leading school fundraising efforts, and launching a pilot program for urban agriculture in a public right-of-way.

Through my work with North Beach Neighbors and my broader civic engagement, I have firsthand experience advocating for community interests, analyzing public policy, and ensuring that residents' voices are heard. I am committed to equitable and transparent oversight of public funds and will bring both my professional expertise and deep community ties to this position.



**Business and/or Professional Experience:**

I have extensive experience in auditing, real estate development, permitting, and regulatory processes. I began my career in London, working as an auditor for WS Atkins Rail before transitioning to Transport for London, where I supported the forthcoming public-private partnership of their rail system. After moving to San Francisco, I spent 13 years at the Planning Department, focusing on permitting, policy development, and sustainability. I later joined Pillsbury Winthrop Shaw Pittman LLP as a senior legal analyst in the Environmental, Land Use, and Real Estate practice group.

In 2017, I launched my own consulting practice, where I assist homeowners, small-scale developers, and business owners in navigating complex permitting and compliance requirements. My work requires a deep understanding of city regulations, financial accountability, and stakeholder engagement to ensure projects align with both policy objectives and community needs.

I am committed to transparency, responsible fiscal oversight, and public accountability. My experience in both the public and private sectors has given me firsthand insight into the impact of public funding on local projects and infrastructure. I understand the importance of ensuring taxpayer dollars are spent efficiently and effectively, and I am eager to contribute my expertise to the Citizens' General Obligation Bond Oversight Committee.

**Civic Activities:**

I am applying for the community organization seat on the Citizens' General Obligation Bond Oversight Committee, representing the perspective of residents actively engaged in neighborhood and civic groups. As a member of the Planning and Zoning Committee of North Beach Neighbors, I work directly with community members to address land use policies, historic preservation efforts, and state housing initiatives. I have presented to the organization on complex policy issues, answered questions from residents, and helped navigate discussions on neighborhood impacts.

Beyond my role in North Beach Neighbors, I have a strong record of civic engagement, including spearheading a pilot program for urban agriculture in a public right-of-way, participating in school fundraisers, and supporting local initiatives that improve neighborhood quality of life. My experience in both advocacy and public policy ensures that I can effectively represent community interests on the Committee and contribute to the responsible oversight of public funds.

Have you attended any meetings of the body to which you are applying? Yes ☒ No ☐

An appearance before the Rules Committee may be required at a scheduled public hearing, prior to the Board of Supervisors considering the recommended appointment. Applications should be received ten (10) days prior to the scheduled public hearing.

Date: February 15, 2025 Applicant's Signature (required): Kate McGee Digitally signed by Kate McGee  
Date: 2025.02.14 08:45:06 -08'00'

(Manually sign or type your complete name.)

NOTE: By typing your complete name, you are hereby consenting to use of electronic signature.)

Please Note: Your application will be retained for one year. Once completed, this form, including all attachments, become public record.

**FOR OFFICE USE ONLY:**

Appointed to Seat #: \_\_\_\_\_ Term Expires: \_\_\_\_\_ Date Vacated: \_\_\_\_\_

**STATEMENT OF ECONOMIC INTERESTS**  
**COVER PAGE**  
*A PUBLIC DOCUMENT*

Date Initial Filing Received  
Filing Official Use Only

Please type or print in ink.

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

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

Agency Name (Do not use acronyms)

Controller's Office

Division, Board, Department, District, if applicable

Citizens' General Obligation Bond Oversight Committee

Your Position

Seat #3

► 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, Retired Judge, Pro Tem Judge, or Court Commissioner  
(Statewide Jurisdiction)

☐ Multi-County

☐ County of

☒ City of San Francisco

☐ Other

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

☐ **Annual:** The period covered is January 1, 2024, through  
December 31, 2024.

☐ **Leaving Office:** Date Left / /  
(Check one circle below.)

-or-

The period covered is / / , through  
December 31, 2024.

☐ The period covered is January 1, 2024, through the date of  
leaving office.

-or-

☒ **Assuming Office:** Date assumed 04 / 01 / 2025

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

☐ **Candidate:** Date of Election and office sought, if different than Part 1:

**4. Schedule Summary (required)**

► Total number of pages including this cover page: 7

**Schedules attached**

☐ **Schedule A-1 - Investments** – schedule attached

☒ **Schedule C - Income, Loans, & Business Positions** – schedule attached

☒ **Schedule A-2 - Investments** – schedule attached

☐ **Schedule D - Income – Gifts** – schedule attached

☒ **Schedule B - Real Property** – schedule attached

☐ **Schedule E - Income – Gifts – Travel Payments** – schedule attached

-or- ☐ **None - No reportable interests on any schedule**

**5. Verification**

MAILING ADDRESS STREET CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)

2031 1/2 Powell Street

San Francisco

CA

94133

DAYTIME TELEPHONE NUMBER

( 415 ) 298-5219

EMAIL ADDRESS

kate@ebo-strategy.com

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

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

Date Signed 03/01/2025  
(month, day, year)

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

# SCHEDULE A-1

## Investments

### Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

CALIFORNIA FORM **700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Kate McGee

► 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:

\_\_\_\_\_/\_\_\_\_\_/24      \_\_\_\_\_/\_\_\_\_\_/24  
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:

\_\_\_\_\_/\_\_\_\_\_/24      \_\_\_\_\_/\_\_\_\_\_/24  
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:

\_\_\_\_\_/\_\_\_\_\_/24      \_\_\_\_\_/\_\_\_\_\_/24  
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:

\_\_\_\_\_/\_\_\_\_\_/24      \_\_\_\_\_/\_\_\_\_\_/24  
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:

\_\_\_\_\_/\_\_\_\_\_/24      \_\_\_\_\_/\_\_\_\_\_/24  
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:

\_\_\_\_\_/\_\_\_\_\_/24      \_\_\_\_\_/\_\_\_\_\_/24  
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  
**Kate McGee**

**1. BUSINESS ENTITY OR TRUST**

**KM Planning Strategy (DBA EBO Strategy)**

Name  
**2031 1/2 Powell Street**

Address (Business Address Acceptable)

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

GENERAL DESCRIPTION OF THIS BUSINESS  
**Planning & Development Consultancy**

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

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/24 ACQUIRED \_\_\_\_/\_\_\_\_/24 DISPOSED

NATURE OF INVESTMENT  
☐ Partnership ☐ Sole Proprietorship ☒ **S-Corp**  
Other

YOUR BUSINESS POSITION **President**

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

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

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

☐ None or ☒ Names listed below

**Coale Johnson, Craig O'Connell, Emerald Fund, Erwin O'Toole, Marci Glazer**

**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

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/24 ACQUIRED \_\_\_\_/\_\_\_\_/24 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

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/24 ACQUIRED \_\_\_\_/\_\_\_\_/24 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 or ☐ Names listed below

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

Check one box:  
☐ INVESTMENT ☐ REAL PROPERTY

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

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

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

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/24 ACQUIRED \_\_\_\_/\_\_\_\_/24 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:

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

Name  
**Kate McGee**

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

**0064/006**

CITY

**San Francisco**

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☒ Over \$1,000,000

IF APPLICABLE, LIST DATE:

\_\_\_\_\_/\_\_\_\_\_/24    **10/02/24**  
ACQUIRED    DISPOSED

NATURE OF INTEREST

- ☒ Ownership/Deed of Trust    ☐ Easement  
☐ Leasehold \_\_\_\_\_  
Yrs. remaining    Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

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

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

☐ None

**Alexa Di Paola, Reid Hodder**

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

CITY

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

\_\_\_\_\_/\_\_\_\_\_/24    \_\_\_\_/\_\_\_\_\_/24  
ACQUIRED    DISPOSED

NATURE OF INTEREST

- ☐ Ownership/Deed of Trust    ☐ Easement  
☐ Leasehold \_\_\_\_\_  
Yrs. remaining    Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

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

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

☐ None

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

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

\_\_\_\_\_%    ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000    ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000    ☐ OVER \$100,000  
☐ Guarantor, if applicable

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

\_\_\_\_\_%    ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000    ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000    ☐ OVER \$100,000  
☐ Guarantor, if applicable

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

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

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <b>Kate McGee</b>

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME <b>KM Planning Strategy (DBA EBO Strategy)</b>	NAME OF SOURCE OF INCOME
ADDRESS (Business Address Acceptable) <b>2031 1/2 Powell Street, SF, CA, 94133</b>	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE <b>Consulting</b>	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION <b>President</b>	YOUR BUSINESS POSITION
GROSS INCOME RECEIVED <input type="checkbox"/> No Income - Business Position Only <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	GROSS INCOME RECEIVED <input type="checkbox"/> No Income - Business Position Only <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
CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input checked="" type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.) <input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.) <input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.) <input type="checkbox"/> Loan repayment <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ (Describe) <input type="checkbox"/> Other _____ (Describe)	CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.) <input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.) <input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.) <input type="checkbox"/> Loan repayment <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ (Describe) <input type="checkbox"/> Other _____ (Describe)

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

\* You are not required to report loans from a commercial lending institution, 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*	INTEREST RATE	TERM (Months/Years)
_____	_____ % <input type="checkbox"/> None	_____
ADDRESS (Business Address Acceptable)	SECURITY FOR LOAN	
_____	<input type="checkbox"/> None <input type="checkbox"/> Personal residence	
BUSINESS ACTIVITY, IF ANY, OF LENDER	<input type="checkbox"/> Real Property _____	Street address
_____		City
HIGHEST BALANCE DURING REPORTING PERIOD	<input type="checkbox"/> Guarantor _____	
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> Other _____	(Describe)
<input type="checkbox"/> \$1,001 - \$10,000		
<input type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> OVER \$100,000		

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



# SCHEDULE D Income – Gifts

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
**Kate McGee**

<div>▶ NAME OF SOURCE (Not an Acronym)</div> <div>ADDRESS (Business Address Acceptable)</div> <div>BUSINESS ACTIVITY, IF ANY, OF SOURCE</div> <table><tr><th>DATE (mm/dd/yy)</th><th>VALUE</th><th>DESCRIPTION OF GIFT(S)</th></tr><tr><td>___/___/___</td><td>\$ _____</td><td>_____</td></tr><tr><td>___/___/___</td><td>\$ _____</td><td>_____</td></tr><tr><td>___/___/___</td><td>\$ _____</td><td>_____</td></tr></table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	___/___/___	\$ _____	_____	___/___/___	\$ _____	_____	___/___/___	\$ _____	_____	<div>▶ NAME OF SOURCE (Not an Acronym)</div> <div>ADDRESS (Business Address Acceptable)</div> <div>BUSINESS ACTIVITY, IF ANY, OF SOURCE</div> <table><tr><th>DATE (mm/dd/yy)</th><th>VALUE</th><th>DESCRIPTION OF GIFT(S)</th></tr><tr><td>___/___/___</td><td>\$ _____</td><td>_____</td></tr><tr><td>___/___/___</td><td>\$ _____</td><td>_____</td></tr><tr><td>___/___/___</td><td>\$ _____</td><td>_____</td></tr></table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	___/___/___	\$ _____	_____	___/___/___	\$ _____	_____	___/___/___	\$ _____	_____
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)																							
___/___/___	\$ _____	_____																							
___/___/___	\$ _____	_____																							
___/___/___	\$ _____	_____																							
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)																							
___/___/___	\$ _____	_____																							
___/___/___	\$ _____	_____																							
___/___/___	\$ _____	_____																							
<div>▶ NAME OF SOURCE (Not an Acronym)</div> <div>ADDRESS (Business Address Acceptable)</div> <div>BUSINESS ACTIVITY, IF ANY, OF SOURCE</div> <table><tr><th>DATE (mm/dd/yy)</th><th>VALUE</th><th>DESCRIPTION OF GIFT(S)</th></tr><tr><td>___/___/___</td><td>\$ _____</td><td>_____</td></tr><tr><td>___/___/___</td><td>\$ _____</td><td>_____</td></tr><tr><td>___/___/___</td><td>\$ _____</td><td>_____</td></tr></table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	___/___/___	\$ _____	_____	___/___/___	\$ _____	_____	___/___/___	\$ _____	_____	<div>▶ NAME OF SOURCE (Not an Acronym)</div> <div>ADDRESS (Business Address Acceptable)</div> <div>BUSINESS ACTIVITY, IF ANY, OF SOURCE</div> <table><tr><th>DATE (mm/dd/yy)</th><th>VALUE</th><th>DESCRIPTION OF GIFT(S)</th></tr><tr><td>___/___/___</td><td>\$ _____</td><td>_____</td></tr><tr><td>___/___/___</td><td>\$ _____</td><td>_____</td></tr><tr><td>___/___/___</td><td>\$ _____</td><td>_____</td></tr></table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	___/___/___	\$ _____	_____	___/___/___	\$ _____	_____	___/___/___	\$ _____	_____
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)																							
___/___/___	\$ _____	_____																							
___/___/___	\$ _____	_____																							
___/___/___	\$ _____	_____																							
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)																							
___/___/___	\$ _____	_____																							
___/___/___	\$ _____	_____																							
___/___/___	\$ _____	_____																							
<div>▶ NAME OF SOURCE (Not an Acronym)</div> <div>ADDRESS (Business Address Acceptable)</div> <div>BUSINESS ACTIVITY, IF ANY, OF SOURCE</div> <table><tr><th>DATE (mm/dd/yy)</th><th>VALUE</th><th>DESCRIPTION OF GIFT(S)</th></tr><tr><td>___/___/___</td><td>\$ _____</td><td>_____</td></tr><tr><td>___/___/___</td><td>\$ _____</td><td>_____</td></tr><tr><td>___/___/___</td><td>\$ _____</td><td>_____</td></tr></table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	___/___/___	\$ _____	_____	___/___/___	\$ _____	_____	___/___/___	\$ _____	_____	<div>▶ NAME OF SOURCE (Not an Acronym)</div> <div>ADDRESS (Business Address Acceptable)</div> <div>BUSINESS ACTIVITY, IF ANY, OF SOURCE</div> <table><tr><th>DATE (mm/dd/yy)</th><th>VALUE</th><th>DESCRIPTION OF GIFT(S)</th></tr><tr><td>___/___/___</td><td>\$ _____</td><td>_____</td></tr><tr><td>___/___/___</td><td>\$ _____</td><td>_____</td></tr><tr><td>___/___/___</td><td>\$ _____</td><td>_____</td></tr></table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	___/___/___	\$ _____	_____	___/___/___	\$ _____	_____	___/___/___	\$ _____	_____
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)																							
___/___/___	\$ _____	_____																							
___/___/___	\$ _____	_____																							
___/___/___	\$ _____	_____																							
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)																							
___/___/___	\$ _____	_____																							
___/___/___	\$ _____	_____																							
___/___/___	\$ _____	_____																							

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

\_\_\_\_\_

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

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <b>Kate McGee</b>

- Mark either the gift or income box.
- Mark the “501(c)(3)” box for a travel payment received from a nonprofit 501(c)(3) organization or the “Speech” box if you made a speech or participated in a panel. Per Government Code Section 89506, these payments may not be subject to the gift limit. However, they may result in a disqualifying conflict of interest.
- For gifts of travel, provide the travel destination.

▶ NAME OF SOURCE <i>(Not an Acronym)</i>
ADDRESS <i>(Business Address Acceptable)</i>
CITY AND STATE
<input type="checkbox"/> 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S): ____/____/____ - ____/____/____ AMT: \$_____ <i>(If gift)</i>
▶ MUST CHECK ONE: <input type="checkbox"/> Gift <b>-or-</b> <input type="checkbox"/> Income
<input type="checkbox"/> Made a Speech/Participated in a Panel
<input type="checkbox"/> Other - Provide Description _____
▶ If Gift, Provide Travel Destination _____

▶ NAME OF SOURCE <i>(Not an Acronym)</i>
ADDRESS <i>(Business Address Acceptable)</i>
CITY AND STATE
<input type="checkbox"/> 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S): ____/____/____ - ____/____/____ AMT: \$_____ <i>(If gift)</i>
▶ MUST CHECK ONE: <input type="checkbox"/> Gift <b>-or-</b> <input type="checkbox"/> Income
<input type="checkbox"/> Made a Speech/Participated in a Panel
<input type="checkbox"/> Other - Provide Description _____
▶ If Gift, Provide Travel Destination _____

▶ NAME OF SOURCE <i>(Not an Acronym)</i>
ADDRESS <i>(Business Address Acceptable)</i>
CITY AND STATE
<input type="checkbox"/> 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S): ____/____/____ - ____/____/____ AMT: \$_____ <i>(If gift)</i>
▶ MUST CHECK ONE: <input type="checkbox"/> Gift <b>-or-</b> <input type="checkbox"/> Income
<input type="checkbox"/> Made a Speech/Participated in a Panel
<input type="checkbox"/> Other - Provide Description _____
▶ If Gift, Provide Travel Destination _____

▶ NAME OF SOURCE <i>(Not an Acronym)</i>
ADDRESS <i>(Business Address Acceptable)</i>
CITY AND STATE
<input type="checkbox"/> 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S): ____/____/____ - ____/____/____ AMT: \$_____ <i>(If gift)</i>
▶ MUST CHECK ONE: <input type="checkbox"/> Gift <b>-or-</b> <input type="checkbox"/> Income
<input type="checkbox"/> Made a Speech/Participated in a Panel
<input type="checkbox"/> Other - Provide Description _____
▶ If Gift, Provide Travel Destination _____

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

\_\_\_\_\_

BOARD of SUPERVISORS



City Hall  
1 Dr. Carlton B. Goodlett Place, Room 244  
San Francisco 94102-4689  
Tel. No. (415) 554-5184  
Fax No. (415) 554-5163  
TDD/TTY No. (415) 554-5227

**Application for Boards, Commissions, Committees, & Task Forces**

Name of Board/Commission/Committee/Task Force: Citizens' General Obligation Bond Oversight Committee

Seat # (Required - see Vacancy Notice for qualifications): 3

Full Name: Min Chang

Zip Code: 94105

Occupation: CEO

Work Phone: 415-930-1888

Employer: Homebridge

Business Address: 1035 Market Street

Zip Code: 94103

Business Email: mchang@homebridgeca.org

Home Email: [REDACTED]

Pursuant to Charter, Section 4.101(a)(2), Boards and Commissions established by the Charter must consist of residents of the City and County of San Francisco who are 18 years of age or older (unless otherwise stated in the code authority). For certain appointments, the Board of Supervisors may waive the residency requirement.

Resident of San Francisco: Yes ☒ No ☐

If No, place of residence: \_\_\_\_\_

18 Years of Age or Older: Yes ☒ No ☐

Pursuant to Charter, Section 4.101(a)(1), please state how your qualifications represent the communities of interest, neighborhoods, and the diversity in ethnicity, race, age, sex, sexual orientation, gender identity, types of disabilities, and any other relevant demographic qualities of the City and County of San Francisco:

U.S. citizen. Born in Taiwan and lived in Africa, Singapore, and China. Traveled extensively throughout Europe, Asia Pacific, the Middle East, Africa, and North, Central and South America and Antarctica. Fluent in Chinese (Mandarin) and French. Assistant instructor in scuba diving, ballet dancer and avid ballroom dancer. Omnicom Board Director for 30 Agency and Regional Boards. American Heart Association Woman of Impact Nominee. Certified in APICS CPIM and Six Sigma Green Belt. Johns Hopkins SAIS DIA Club Secretary and IR Council Career Chair and Member of the Deans Crowell Committee on Diversity and Inclusion, MIT Alumni Board, University of Pennsylvania Class of 1987 Alumni Board. Director of the Chinese Folk-Dance Troupe of Delaware for seven years. Mother of two beautiful young ladies.

Currently live (Rincon Hill) and work (Tenderloin) in the City as the CEO of a non-profit focused on caring for older adults and adults with disabilities. Employ over 500 staff that represent all ethnicities and backgrounds. A vital part of the community in SF. Represent older adults at age 59 and am a proud Chinese American that represents the Asian community here in SF. Ran for SFUSD board this past November and know all 11 Districts very well.



**Business and/or Professional Experience:**

I am the CEO of a 500+ healthcare organization that serves over 75,000 of the most underserved populations and caregivers in San Francisco and across California.

I have over 35 years of experience in strategic leadership, financial management, business development, and operations, spanning six continents. Her deep understanding of cross-cultural dynamics enriches her approach to serving diverse communities. In the past, she was the Chief Strategy Officer at On Lok, a healthcare company serving older adults in the Bay Area, President and CEO of Microsurgical Technology, a global medical devices company, and CEO at Kin On Health Care Center, a healthcare company specializing in long term care. Her background includes 13 years leading global marketing communications and other leadership roles spanning 10+ years, including at Omnicom Group, Honeywell, AstraZeneca, Otis Elevators, and Procter & Gamble and 11 years in management consulting with Ernst & Young, Booz Allen and Accenture.

I hold a Doctorate in International Affairs and a Master of International Public Policy from Johns Hopkins University, School of Advanced International Studies. She received her Master of Science in Management from the Massachusetts Institute of Technology Sloan School of Management and a Bachelor of Science and Bachelor of Arts from the University of Pennsylvania.

**Civic Activities:**

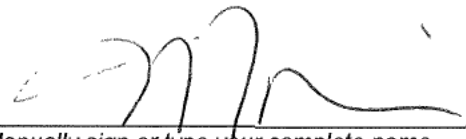
I am part of the IHSS Task Force, the CA Long-term Support Services Coalition, Human Services Network and other key groups and initiatives focused on older adults and adults with disabilities. I also work very closely with DAS, CDA, CDSS, HSA, OEWD, Justice in Aging, MOHCD, SF Dept of Homelessness and Supportive Housing, SEIU, On Lok, IOA, Self-Help, ECS, DISH, TNDC, HomeRise, Laguna Honda, CAPA, CICA, CWDB, CA Dept of Small Business Advocate and many other CBOs and organizations in SF. We are also currently working with the Mayor's office on shelter care.

I also active with SFUSD and ran for the school board as a first-time candidate. I have attended many school board meetings, parents/community meetings, canvassed the neighborhoods to better understand key issues and spoken out on key challenges impacting our public school system.

Have you attended any meetings of the body to which you are applying? Yes ☐ No ☒

An appearance before the Rules Committee may be required at a scheduled public hearing, prior to the Board of Supervisors considering the recommended appointment. Applications should be received ten (10) days prior to the scheduled public hearing.

Date: 2/17/25 Applicant's Signature (required):

  
(Manually sign or type your complete name.  
NOTE: By typing your complete name, you are  
hereby consenting to use of electronic signature.)

Please Note: Your application will be retained for one year. Once completed, this form, including all attachments, become public record.

**FOR OFFICE USE ONLY:**

Appointed to Seat #: \_\_\_\_\_ Term Expires: \_\_\_\_\_ Date Vacated: \_\_\_\_\_

## MIN CHANG

### EXPERIENCE

- 2024-Present**     **HOMEBRIDGE**     **SAN FRANCISCO, CA**  
**Chief Executive Officer**
- Leading a \$55MM non-profit company with over 500 employees and serving over 1,100 of the most vulnerable older adults and disabled in San Francisco
  - Expanding the core businesses of home care and caregiver training in partnership with the counties and state of California
  - Growing business lines in case management, community supports and enhanced care management in California
- 2022-2024**     **ON LOK**     **SAN FRANCISCO, CA**  
**Chief Strategy Officer**
- Developed the strategic plan and business plans for a \$250MM non-profit organization in the older adults, health care industry
  - Redesigned the organization structure, business model, core capabilities and performance metrics for this organization of 1,000+ employees and 6,000+ customers
  - Developed new business opportunities with key partners in California to build new capabilities and services
- 2022-2023**     **MICROSURGICAL TECHNOLOGY**     **REDMOND, WA**  
**President & Chief Executive Officer**
- Led a \$70MM company in the medical devices industry specializing in ophthalmic surgical equipment and supplies
  - Managed 160 people across 70 markets globally and servicing 4,600 customers
  - Delivered on profits annually at 28% of revenues and expanding growth at 30% annually
  - Oversaw M&A activity as well as partnership discussions across the Americas, EMEA and APAC
- 2020-2022**     **KIN ON HEALTH CARE CENTER**     **SEATTLE, WA**  
**Chief Executive Officer**
- Led a \$20MM non-profit organization of 450 that provides services in skilled nursing, supportive housing, home care, social services, healthy living, and development for over 3,000 older Asians in Greater Seattle
  - Partnered with over 1,500 donors, 200 volunteers and multiple government agencies and health care partners to deliver care to the community
  - Launched new services in home health and independent living (East Side/North Side campus)
  - Worked with a Board of Directors comprised of 21 members and multiple committees
  - Delivered \$1.7MM in profits for the first time in Kin On's 30+ year history
- 2013-2020**     **OMNICOM GROUP**  
**President Asia Pacific, Middle East & Africa, DAS Group of Companies**     **SHANGHAI, CHINA**
- Responsible for all 30 of our specialty communications agencies in Asia Pacific, Middle East, and Africa in terms of their operational and financial performance totaling over \$300MM in revenues
  - Responsible for all our agencies in Africa (across 26 African countries) and in the Middle East (across 10 Middle East countries) in terms of strategy and client relationships
  - Led 60 of our integrated client teams in the regions and building new and existing client relationships
  - Led our integrated agency teams in the regions and building new and existing disciplines and offerings across PR, Branding, Research, Healthcare, CRM, Digital and Brand Activation

- Drove the acquisition activities in region from target identification to deal completion and integration
- Steered our agencies directly by sitting on the Board of Directors of 30 of our agency entities in the region
- Developed new and existing markets (total of 100+ markets) and talent (over 5,000) in Asia Pacific, Africa, and Middle East
- Named to Ad Age's Women to Watch China 2013
- Named Juror for the 2015 EEMAX Global Experiential Awards in Mumbai India

**2011-2013**

**OMNICOM GROUP**

**Executive Vice President Business Development & Client Relations Asia**

**NEW YORK, NY**

- Drove business development across all markets of Asia and developing integrated agency opportunities with MNCs and local clients in the Region
- Developed effective business development tools and assets for our agencies in the Region and for our agencies looking to enter the Region
- Led the Imagine offering and the Juice/Catalyst offering in the Region to help develop both client capabilities as well as agency disciplines
- Worked with Omnicom's global network of agencies in developing their strategies, business plans and potential client base in Asia
- Developed the talent development program for Asia inclusive of recruiting, retention, training, succession planning and organizational transformation

**2010-2011**

**OMNICOM GROUP**

**Senior Vice President Operations, Diversified Agency Services**

**NEW YORK, NY**

- Led all operational effectiveness and efficiency initiatives across Omnicom's 170+ agencies globally
- Spearheaded key acquisitions for Omnicom from target identification, due diligence completion, deal structuring through to transaction completion and on-boarding
- Worked with Omnicom's global network of agencies in developing their strategies, business plans and potential client base
- Developed and led new Omnicom entities (e.g., OPG) that leverage and consolidate agency capabilities throughout the network
- Led the Imagine offering for our agencies' core clients and emerging clients globally
- Drove the development of DAS capabilities in the Asia Pacific region and the DAS China Field Marketing group of companies

**2008-2009**

**OMNICOM GROUP**

**Chief Strategy Officer, MarketStar**

**OGDEN, UT**

- Led MarketStar's overall strategy development and execution globally including account planning, product commercialization and business planning and resource allocation
- Built MarketStar's presence in emerging markets in Latin America, Asia, and Europe
- Developed MarketStar's acquisition strategy globally and executing from due diligence through integration

**2007-2010**

**OMNICOM GROUP**

**Vice President Operations, Diversified Agency Services**

**NEW YORK, NY**

- Led all operational effectiveness and efficiency initiatives across Omnicom's 170+ agencies globally
- Spearheaded key acquisitions for Omnicom from target identification, due diligence completion, deal structuring through to transaction completion and on-boarding
- Worked with Omnicom's global network of agencies in developing their strategies, business plans and potential client base
- Developed and led new Omnicom entities (e.g., OmniSource, OPG) that leverage and consolidate agency capabilities throughout the network
- Led the Imagine offering for our agencies' core clients and emerging clients globally



<b>2006-2007</b>	<b>HONEYWELL</b> <b>Vice President Procurement Transformation, Integrated Supply Chain</b> <ul style="list-style-type: none"> <li>• Led Procurement Transformation across all four Honeywell businesses in Aerospace, Automation and Control Systems, Transportation Systems and Specialty Materials and across all three regions of Americas, EMEA and Asia</li> <li>• Drove major initiatives in Category Strategy, Transactional Process Excellence, Organizational Effectiveness, eSolutions and New Business Models</li> <li>• Delivered over \$1.6 Billion in benefits across \$15 Billion in spend for both direct materials and indirect materials and services</li> <li>• Co-led the Senior Procurement Council that champions the Transformation efforts across all of Honeywell's businesses globally</li> </ul>	<b>MORRISTOWN, NJ</b>
<b>2004-2006</b>	<b>ASTRAZENECA PHARMACEUTICALS</b> <b>Vice President Procurement</b> <ul style="list-style-type: none"> <li>• Led 100+ procurement professionals in the U.S. overseeing \$2.5 Billion in spend for materials and services</li> <li>• Launched cross functional initiative (Category Management) covering all areas of spend with over 25 category teams</li> <li>• Implemented a suite of spend management solutions including sourcing, PTP, contracts and spend analysis</li> <li>• Delivered over \$50MM in savings annually across all functional areas inclusive of Commercial, R&amp;D, Operations, HR, Finance and IS</li> </ul>	<b>WILMINGTON, DE</b>
<b>2000-2004</b>	<b>ACCENTURE – MANAGEMENT CONSULTING</b> <b>Partner, Supply Chain Management, Health, and Life Sciences</b> <ul style="list-style-type: none"> <li>• Led the development of the procurement vision for a major global consumer products, medical devices, and pharmaceuticals company</li> <li>• Managed the supply chain operations and quality projects (strategic demand and supply planning, strategic sourcing and eprocurement, incident process alignment, GMP training, product disposition, information architecture, process development, clinical development, manufacturing strategy) at a major global biopharmaceuticals company</li> <li>• Managed the procurement projects (eprocurement design and implementation, central laboratory services outsourcing, purchase to pay reengineering) at a major global pharmaceuticals company</li> <li>• Directed all procurement and exchange opportunities in the pharmaceuticals and life sciences area</li> </ul>	<b>PHILADELPHIA, PA</b>
<b>1997-2000</b>	<b>ACCENTURE- MANAGEMENT CONSULTING</b> <b>Senior Manager, Strategic Services, Supply Chain</b> <ul style="list-style-type: none"> <li>• Led a fifteen-member client and consulting team in developing the detailed business case for an eProcurement implementation for a major global pharmaceuticals company</li> <li>• Led a ten-member client and consulting team in developing the data warehouse capability for procurement at a major global pharmaceuticals company</li> <li>• Led a twenty-member client and consulting team in designing and building the integrated promotional materials supply chain processes and systems for a major global pharmaceuticals company</li> <li>• Led a fifty-member client team in developing and implementing the post-merger integration procurement strategy for a major global pharmaceuticals company</li> <li>• Led a global thirteen-member consulting team and a fifty-member client team in developing and implementing the post-merger integration procurement strategy for a major computer manufacturer and service provider</li> </ul>	<b>NEW YORK, NY</b>
<b>1995-1997</b>	<b>BOOZ ALLEN &amp; HAMILTON INC. – MANAGEMENT CONSULTING</b> <b>Associate, Operations Management Group</b> <ul style="list-style-type: none"> <li>• Managed a twenty-member client team in re-engineering the customer services operations of a global commercial bank</li> </ul>	<b>NEW YORK, NY</b>

- Led a twelve-member client team in designing and implementing a new strategic capability development organization at a major health care insurance company
- Managed an eleven-member client team in re-engineering the entire procurement supply chain at a major government nuclear waste treatment site
- Led a nine-member client team in developing the global sourcing strategy for pipe, valves, and fittings at a major oil and gas company
- Managed a five-member client team in re-engineering the product flow of a major oil and gas company

**1993-1995      ERNST & YOUNG - MANAGEMENT CONSULTING      NEW YORK, NY**  
**Senior Consultant, Performance Improvement Group**

- Optimized the factory and distributor network of a leading global snack foods producer
- Created the functional best practices for the leading department store in Canada
- Developed the worldwide sourcing strategy in apparel production for an international sportswear company
- Re-engineered the card member acquisitions process of a leading financial services company
- Optimized the logistics strategy for a Northeast snack foods producer and distributor

**1990-1993      UNITED TECHNOLOGIES CORPORATION      SINGAPORE**  
**OTIS ELEVATOR COMPANY**

**Manufacturing Analyst, Manufacturing Department - Pacific Operations**

- Coordinated the company's largest manufacturing project in the world: the construction of a greenfield factory in Southeast Asia
- Initiated and completed a feasibility study for the factory site, analyzed the market potential and competitor situation, and developed the initial product cost estimates
- Assisted in the construction of the production plan as well as the factory layout, created the financial models, and spearheaded the capital appropriations request through headquarters
- Involved in negotiations with the government, designed and implemented the financial control system and developed the first annual business plan

**Financial Analyst, Financial Planning and Analysis Department - Pacific Operations**

- Responsible for all financial planning and analysis of operating companies in Singapore, Malaysia, Thailand, Indonesia, and the Philippines
- Collaborated closely with the General Manager and Financial Manager of operating companies in developing business plans, analyzing risks and opportunities, and coordinating/leading business projects in the Region

**Treasury Analyst, Corporate Treasury - World Headquarters      FARMINGTON, CT**

- Developed a worldwide asset management program and implemented it at Otis' company in France

**Summer 1989      AMERICAN EXPRESS TRAVEL RELATED SERVICES      NEW YORK, NY**  
**Business Analyst, Consumer Card Group**

- Assisted the CFO in formulating the strategy for launching the "loan product" for AMEX's service establishments

**1987-1988      THE PROCTER AND GAMBLE COMPANY**  
**CINCINNATI, OH**

**Supervisor, Customer Services Operations**

- Trained and developed a seven-member staff in the Accounts Receivable Department
- Responsible for P&G customer accounts in New York, Maryland, Washington D.C., and Delaware

**EDUCATION**

**2019-2021      JOHNS HOPKINS UNIVERSITY      WASHINGTON D.C.**  
**School of Advanced International Studies (SAIS)**  
**Doctorate in International Affairs, May 2021**

- Course work in international affairs: international relations, world order, international law, conflict management, U.S. constitutional law, climate change development, American intelligence, contemporary china politics, American foreign policy. GPA: 3.93
- Doctorate thesis on climate change and international human rights law

**2019-2020**     **School of Advanced International Studies (SAIS)**  
Master of International Public Policy, May 2020

**1988-1990**     **MASSACHUSETTS INSTITUTE OF TECHNOLOGY**     **CAMBRIDGE, MA**  
**Sloan School of Management**  
Master of Science in Management, concentration in International Management and Corporate Strategy,  
January 1990, *Cum Laude*

**1983-1987**     **UNIVERSITY OF PENNSYLVANIA**     **PHILADELPHIA, PA**  
**The Wharton School of Business**  
Bachelor of Science in Economics, concentration in Finance, May 1987, *Cum Laude*  
**The School of Arts and Sciences**  
Concurrent Bachelor of Arts, major in Economics, May 1987, *Cum Laude*

**PERSONAL**     U.S. citizen. Born in Taiwan and lived in Africa, Singapore, and China. Traveled extensively throughout Europe, Asia Pacific, the Middle East, Africa, and North, Central and South America and Antarctica. Fluent in Chinese (Mandarin) and French. Assistant instructor in scuba diving, ballet dancer and avid ballroom dancer. Omnicom Board Director for 30 Agency and Regional Boards. American Heart Association Woman of Impact Nominee. Certified in APICS CPIM and Six Sigma Green Belt. Johns Hopkins SAIS DIA Club Secretary and IR Council Career Chair and Member of the Dean's Crowell Committee on Diversity and Inclusion, MIT Alumni Board, University of Pennsylvania Class of 1987 Alumni Board. Director of the Chinese Folk-Dance Troupe of Delaware for seven years. Mother of two beautiful young ladies.

**CALIFORNIA FORM 700**  
**STATEMENT OF ECONOMIC INTERESTS**  
**AMENDMENT**

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

Please type or print in ink

Name of filer: CHANG (Last) MIN (First)  (Middle)

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

Agency Name (Do not use acronym): Bond Oversight Committee  
 Division, Board, Department, District, if applicable:

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

Agency:  Position:

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

☐ State ☐ Judge, Retired Judge, Probation Judge, or Court Commissioner (Statewide Jurisdiction)  
☒ Municipality ☐ County of   
 City of SAN FRANCISCO Other:

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

☐ Annual: The period covered is January 1, 2024, through December 31, 2024.  
☐ Learning Office: Date left  (Check one circle below)  
☐ The period covered is January 1, 2024, through the date of leaving office.  
☐ Assuming Office: Date assumed   
☐ The period covered is the date of assuming office through   
☒ Candidate: Date of election  and office sought, if different from Part 1.

**4. Schedule Summary (required)** Total number of pages including this cover page: 4

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

**5. Verification**

Business or Agency Address (Required for Public Document): 299 Fremont St Apt 2110 San Francisco CA 94105

Daytime Telephone Number: 206, 595-5260 E-mail Address: minxchang@gmail.com

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained therein and in any attached schedules is true and complete. I acknowledge this is a public document.

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

Date Signed: 3/5/25 (month/day/year) Signature: [Signature]  
 (If filing original signed paper statement with your filing officer)

PPPS Form 700 (2024/2025)  
 advice@ppps.ca.gov • 866-378-3773 • www.ppps.ca.gov

Min Chang  
 206-595-5260  
 Minxchang@gmail.com

On Mar 5, 2025, at 3:44 PM, BOS-Appointments <BOS-Appointments@sfgov.org> wrote:

Min:

I am in receipt of your application form. Upon review it appears that the required Form 700 was not included. Please provide the Form 700 and I will attach it to your application form. As we are tentatively trying to schedule the matter next week I will need it by the end of today. Thank you.



**SCHEDULE A-1**  
**Investments**  
**Stocks, Bonds, and Other Interests**  
(Ownership Interest is Less Than 10%)

**CALIFORNIA FORM 700**  
Fair Political Practices Commission  
**AMENDMENT**

*Investments must be Reported*  
*Do not attach Statements or Financial Statements*

NAME OF BUSINESS ENTITY  
None listed

GENERAL DESCRIPTION OF THIS BUSINESS  
Non-profit

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

NATURE OF INVESTMENT  
☐ Stock  
☐ Other (Describe)  
☐ Partnership Income Received of \$1 - \$499  
Income Received of \$500 or More Report on Schedule C

IF APPLICABLE, LIST DATE:  
ACQUIRED 1/24 DISPOSED 1/24

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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

NATURE OF INVESTMENT  
☐ Stock  
☐ Other (Describe)  
☐ Partnership Income Received of \$1 - \$499  
Income Received of \$500 or More Report on Schedule C

IF APPLICABLE, LIST DATE:  
ACQUIRED 1/24 DISPOSED 1/24

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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

NATURE OF INVESTMENT  
☐ Stock  
☐ Other (Describe)  
☐ Partnership Income Received of \$1 - \$499  
Income Received of \$500 or More Report on Schedule C

IF APPLICABLE, LIST DATE:  
ACQUIRED 1/24 DISPOSED 1/24

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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

NATURE OF INVESTMENT  
☐ Stock  
☐ Other (Describe)  
☐ Partnership Income Received of \$1 - \$499  
Income Received of \$500 or More Report on Schedule C

IF APPLICABLE, LIST DATE:  
ACQUIRED 1/24 DISPOSED 1/24

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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

NATURE OF INVESTMENT  
☐ Stock  
☐ Other (Describe)  
☐ Partnership Income Received of \$1 - \$499  
Income Received of \$500 or More Report on Schedule C

IF APPLICABLE, LIST DATE:  
ACQUIRED 1/24 DISPOSED 1/24

**Filer's Verification**

Print Name Min Chang

Office, Agency or Court

Statement Type 2024/2025 Annual ☐ Assuming ☐ Leaving  
☐ Annual ☐ Occasional

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 3/5/25  
(month, day, year)

Filer's Signature [Signature]

Comments:

**SCHEDULE A-2**  
**Investments, Income, and Assets**  
**of Business Entities/Trusts**  
(Completed separately by 100% or Greater)

**CALIFORNIA FORM 700**  
USE PREVIOUS EDITIONS COMPLETION  
**AMENDMENT**

**1. BUSINESS ENTITY OR TRUST**

Name Humblebridge  
1025 Market St. SF 94103  
 Address (Business Address) (Include)  
 Check one ☒ Trust or LLC ☐ Business Entity, complete the box then go to 2

**GENERAL DESCRIPTION OF THIS BUSINESS**

Non-profit  
 FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$0 - \$1,000 ☐ 24 ☐ 24  
 \$1,001 - \$10,000 ☐ ACQUIRED DISPOSED  
 \$10,001 - \$100,000 ☐  
 \$100,001 - \$1,000,000 ☐  
 Over \$1,000,000 ☐  
 NATURE OF INVESTMENT:  
☐ Partnership ☐ Sole Proprietorship ☒ Non-profit  
 YOUR BUSINESS POSITION: CEO

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

☐ \$0 - \$499 ☒ \$500 - \$100,000  
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

**3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Include if received from a company)**

☐ None ☒ Name of Source  
CEO Salary \$200,000

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

Check one box:  
☐ INVESTMENT ☐ REAL PROPERTY  
 Listing of Property (List 2 addresses or Account's Capital Number or Other Address of Real Property)

Description of Business Activity (e.g., City or Other Public Location or Other Activity)

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$0 - \$1,000 ☐ 24 ☐ 24  
 \$1,001 - \$10,000 ☐ ACQUIRED DISPOSED  
 \$10,001 - \$100,000 ☐  
 Over \$100,000 ☐

NATURE OF INTEREST:  
☐ Property (Ownership/Lease) of Trust ☐ Stock ☐ Partnership

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

Comments:

**Filer's Verification**

Print Name MH Chang  
 Office, Agency or Court Bond Oversight Committee  
 Statement Type ☐ 2024-2025 Annual ☐ Annual ☐ Auditing ☐ Leaving ☒ Candidate

I have used due 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 3/5/25 (Month, day, year) Filer's Signature [Signature]

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

**CALIFORNIA FORM 700**  
FOR INDIVIDUALS AS PART OF A COMBINATION  
**AMENDMENT**

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
Honbridge  
ADDRESS (Business Address Acceptable)  
1025 Market St. S.F. 94102  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Non-profit  
YOUR BUSINESS POSITION  
CEO  
GROSS INCOME RECEIVED ☐ No Income - Business Position Only  
☐ \$0 - \$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  
(If self-employed use Schedule A-2.)  
☐ Partnership (Less than 10% ownership for 10% or greater use Schedule A-2.)  
☐ Rent of ☐ Real property (see below, etc.)  
☐ Loan repayment  
☐ Commission or ☐ Rental Income (see below, etc.)  
☐ Other ☐ Other

**2. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
ADDRESS (Business Address Acceptable)  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
YOUR BUSINESS POSITION  
GROSS INCOME RECEIVED ☐ No Income - Business Position Only  
☐ \$0 - \$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  
(If self-employed use Schedule A-2.)  
☐ Partnership (Less than 10% ownership for 10% or greater use Schedule A-2.)  
☐ Rent of ☐ Real property (see below, etc.)  
☐ Loan repayment  
☐ Commission or ☐ Rental Income (see below, etc.)  
☐ Other ☐ Other

**COMMENTS:**

**3. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

You are not required to report loans from a commercial lending institution, or any indebtedness incurred 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  
☐ \$0 - \$1,000  
☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000  
☐ OVER \$100,000  
INTEREST RATE ☐ None  
SECURITY FOR LOAN  
☐ None ☐ Personal residence  
☐ Real Property ☐ Other address  
☐ Other ☐ Other

**Filer's Verification**

Print Name Ann Chang Office, Agency or Court  
Statement Type ☐ 2024/2025 Annual ☐ Annual ☐ Assuming ☐ Leaving ☒ Candidate  
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 3/5/25 (month, day, year) Filer's Signature [Signature]

PPSC Form 700 - Schedule C (02/14/22)  
advice@ppsc.ca.gov • 916-275-9773 • www.ppsc.ca.gov