

COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST) Amick (FIRST) Kendra (MIDDLE) Leigh

1. Office, Agency, or Court

Agency Name (Do not use acronyms) Board of Supervisors  
Division, Board, Department, District, if applicable Municipal Fines and Fees Taskforce  
Your Position Taskforce member

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

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

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

- State  Judge or Court Commissioner (Statewide Jurisdiction)
- Multi-County \_\_\_\_\_  County of \_\_\_\_\_
- City of San Francisco  Other \_\_\_\_\_

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

- Annual: The period covered is January 1, 2015, through December 31, 2015.  Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)
- or- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2015.  The period covered is January 1, 2015, through the date of leaving office.
- Assuming Office: Date assumed 09 / 08 / 2016  -or-  The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.
- Candidate: Election year \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_

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

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

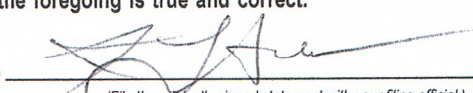
5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)  
885 25th Ave. San Francisco CA 94121  
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS  
( 415 ) 354-6364 kendra.amick@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 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 09/07/2016  
(month, day, year)

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



# SCHEDULE C

## Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Kendra Amick

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
<p>NAME OF SOURCE OF INCOME <u>Bay Area Legal Aid</u></p> <p>ADDRESS <i>(Business Address Acceptable)</i> <u>1035 Market Street, 6th Flr., SF, CA 94103</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Nonprofit Legal Services Organization</u></p> <p>YOUR BUSINESS POSITION <u>Staff Attorney</u></p> <p>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</p> <p>CONSIDERATION FOR WHICH INCOME WAS RECEIVED  <input checked="" type="checkbox"/> Salary      <input type="checkbox"/> Spouse's or registered domestic partner's income  <small>(For self-employed use Schedule A-2.)</small></p> <p><input type="checkbox"/> Partnership <small>(Less than 10% ownership. For 10% or greater use Schedule A-2.)</small></p> <p><input type="checkbox"/> Sale of _____  <small>(Real property, car, boat, etc.)</small></p> <p><input type="checkbox"/> Loan repayment</p> <p><input type="checkbox"/> Commission or      <input type="checkbox"/> Rental Income, <i>list each source of \$10,000 or more</i></p> <p>_____ <small>(Describe)</small></p> <p><input type="checkbox"/> Other _____  <small>(Describe)</small></p>	<p>NAME OF SOURCE OF INCOME _____</p> <p>ADDRESS <i>(Business Address Acceptable)</i> _____</p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE _____</p> <p>YOUR BUSINESS POSITION _____</p> <p>GROSS INCOME RECEIVED  <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</p> <p>CONSIDERATION FOR WHICH INCOME WAS RECEIVED  <input type="checkbox"/> Salary      <input type="checkbox"/> Spouse's or registered domestic partner's income  <small>(For self-employed use Schedule A-2.)</small></p> <p><input type="checkbox"/> Partnership <small>(Less than 10% ownership. For 10% or greater use Schedule A-2.)</small></p> <p><input type="checkbox"/> Sale of _____  <small>(Real property, car, boat, etc.)</small></p> <p><input type="checkbox"/> Loan repayment</p> <p><input type="checkbox"/> Commission or      <input type="checkbox"/> Rental Income, <i>list each source of \$10,000 or more</i></p> <p>_____ <small>(Describe)</small></p> <p><input type="checkbox"/> Other _____  <small>(Describe)</small></p>

▶ 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:

<p>NAME OF LENDER* _____</p> <p>ADDRESS <i>(Business Address Acceptable)</i> _____</p> <p>BUSINESS ACTIVITY, IF ANY, OF LENDER _____</p> <p>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</p>	<p>INTEREST RATE _____%      <input type="checkbox"/> None</p> <p>TERM (Months/Years) _____</p> <p>SECURITY FOR LOAN  <input type="checkbox"/> None      <input type="checkbox"/> Personal residence</p> <p><input type="checkbox"/> Real Property _____  <small>Street address</small></p> <p>_____ <small>City</small></p> <p><input type="checkbox"/> Guarantor _____</p> <p><input type="checkbox"/> Other _____  <small>(Describe)</small></p>
--	---

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