

File No. 110959

Committee Item No. 5  
Board Item No. 4

### COMMITTEE/BOARD OF SUPERVISORS

#### AGENDA PACKET CONTENTS LIST

Committee: Rules

Date 10/11/11

Board of Supervisors Meeting

Date 10/18/11

#### Cmte Board

- Motion
- Resolution
- Ordinance
- Legislative Digest
- Budget Analyst Report
- Legislative Analyst Report
- Youth Commission Report
- Introduction Form (for hearings)
- Department/Agency Cover Letter and/or Report
- MOU
- Grant Information Form
- Grant Budget
- Subcontract Budget
- Contract/Agreement
- Award Letter
- Application
- Public Correspondence

#### OTHER

(Use back side if additional space is needed)

- Form 700
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Completed by: Linda Wong

Date 10/7/11

Completed by: L.W.

Date 10/12/11

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

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[Appointment – Assessment Appeals Board No. 2]

**Motion appointing Ed Campana, term ending September 1, 2014, to the Assessment Appeals Board No. 2.**

MOVED: That the Board of Supervisors of the City and County of San Francisco does hereby appoint the hereinafter designated person to serve as a member of the Assessment Appeals Board No. 2, pursuant to the provisions of the Revenue and Taxation Code, Section 1623, and the San Francisco Administrative Code, Sections 2B.12 through 2B.19, for the term specified:

Ed Campana, seat 8 (ALTERNATE /HEARING OFFICER), succeeding Joseph Tham, term expired, must meet the eligibility criteria set forth in Section 1624.05 of the California Revenue and Taxation Code. Must have a minimum of five years professional experience in the State of California as one of the following: Certified Public Accountant (CPA) or Public Accountant (PA); licensed Real Estate Broker; Attorney; or a Property Appraiser accredited by a nationally recognized professional organization, or a Property Appraiser certified by the Office of Real Estate Appraiser; or as a current member of the Assessment Appeals Board, for a three-year term ending September 1, 2014.

**Assessment Appeals Board**  
 City and County of San Francisco  
 (415) 554-5184 Fax (415) 554-5163



City Hall, Room 244  
 1 Dr. Carlton B. Goodlett Place  
 San Francisco, CA 94102-4697

Complete and return this original Application to the Clerk of the Board of Supervisors

Application for Appointment to:  
 (Please circle one)

Board 1 or Board 1 alternate  
Board 2 or Board 2 alternate

**RECEIVED**  
 DEC 21 2010  
 Assessment Appeals Board

Name: EDUARDO CAMPANA Home Address: HOFFMAN AVE  
 City: SAN FRANCISCO State: CA Zip code: 94114  
 Business Address: 1801 LOMBARD City: SAN FRANCISCO State: CA Zip code: 94123  
 Home Phone: (415) \_\_\_\_\_ Work Phone: (415) 447-8704 Fax #: (415) 447-8884  
 Pager #: N/A E-Mail Address: @SOMAPRO.COM

Are you a United States citizen, or a resident alien who is eligible for and has applied for citizenship?

Yes  No

Have you ever been convicted of a felony in this state, or convicted of any offense which, if committed in this state, would be a felony?  Yes  No

(If yes, please attach a statement describing the offense(s) for which you have been convicted, the date of the conviction(s), and the court(s) that convicted you.)

Pursuant to California Revenue and Taxation Code Section 1624, the following qualifications are required:

A person shall not be eligible for nomination for membership on an assessment appeals board unless he or she has a minimum of five years' professional experience in this state as one of the following: certified public accountant or public accountant, licensed real estate broker, attorney, or property appraiser accredited by a nationally recognized professional organization, or property appraiser certified by either the Office of Real Estate Appraiser or by the State Board of Equalization. Documentation of qualifying experience must be submitted with this application form. This requirement does not apply to incumbent board members nominated for appointment to their same seats.

Please state your qualifications: <sup>YES</sup> 20+ OF RESIDENTIAL & COMMERCIAL REAL ESTATE EXPERIENCE IN SAN FRANCISCO, BROKER, ADVANCED DEGREE IN REAL ESTATE EVALUATION FROM UC BERKELEY

Please state your business and/or professional experience: MEMBER OF SF BOARD OF REALTORS, BERKELEY  
ASSESSED PROPERTY VALUES OF OVER A THOUSAN SF PROPERTIES

Occupation: REAL ESTATE BROKER Education: BA, MSW, DSW

Civic Activities: ACTIVE IN LATINO COMMUNITY, POLICE COMMISSIONER UNDER ASLOS & JORDAN

Ethnicity (optional): MEXICAN Sex (optional):  M  F

Other Personal Information (optional) I'M BRIGHT, PERSONABLE, SKILLED NEGOTIATOR, HARD WORKER

Would you be able to attend Day Meetings?  Yes  No Night meetings?  Yes  No

How many days a week would you be available for hearings? DEPENDS ON MY WORKLOAD

Have you attended an Assessment Appeals Board meeting?  Yes  No

Appearance before the RULES COMMITTEE is a requirement before any appointment can be made.

Please Note: Your application will be retained for one year.

Date: 12-10-2010 Applicant's Signature: \_\_\_\_\_

For Office Use Only: Appointed Board #: \_\_\_\_\_ Seat #: \_\_\_\_\_ Term Expires: \_\_\_\_\_

---

EDWARD CAMPAÑA, C.R.S.  
Coldwell Banker Residential Brokerage  
1801 Lombard Street  
415 447-8704  
415 447-8884  
www.somapro.com

**Objective**

Expand my experiences in life and work in order to enhance my development into a well rounded citizen.

**Skills**

- Assessment of real estate values
- Unbiased analysis of data and commentary
- Report writing
- Statistical Analysis
- Calm in the face of adversity
- Communication
- Management
- Leadership
- Forecasting the real estate market place in San Francisco
- Presentations both one on one and group
- Development of marketing strategies
- Teaching research, evaluation, and human behavior
- Sales
- Creativity

**Education**

**San Jose State BA 1966**  
**UC Berkeley MSW 1972**  
**UC Berkley DSW (abd) 1975**

**Achievements**

- President of Social Welfare Student Union UC Berkeley 1973
- Regional Director National Association of Student Social Worker 1974
- San Francisco Police Commissioner 1989-1992
- Certified Residential Specialist 1995-Present

**Experience**

**Associate Professor SFSU Graduate School of Social Welfare**  
1974 -1980

Director of the Title XX MSW Program DSS San Francisco  
Duties included: Managing everyday operation of the graduate on-site program at DSS,  
Teaching research and evaluation, child development. Supervising Master Theses.

**President/CEO MIRA(Millennium Interdisciplinary Research Associates)**  
1980-1986  
MIRA was a research and demonstration evaluation firm overseeing the evaluation of

local and national research projects sponsored by Department of Mental Health, Department of Justice and San Francisco foundation involving Latino mental health models for youth, violent juvenile behavior and grass roots organizational strategies to combat these phenomenon.

**Real Estate Broker**

1887-present

Engaged in all aspects of residential and commercial real estate including but not limited to assessment of value, marketing strategies, loan qualification, negotiation and education. Obtained Certified Residential Specialist (CRS) designation in 1995. The CRS designation is held by less than 4 percent of all licensed Realtors and must have significant experience and demonstrate volume of real estate transactions or gross sales, as well as complete rigorous educational requirements.

**STATE OF CALIFORNIA**

**Department of Real Estate**  
*Serving Californians Since 1917*

**Licensee**

**Edward James Campana**

**ID Number**  
**00941738**

**Type**  
**Broker**

**STATEMENT OF ECONOMIC INTERESTS**

Date Received  
 Official Use Only

**COVER PAGE**

Please type or print in ink.

NAME OF FILER

CAMPAÑA  
 (LAST)

EDWARD  
 (FIRST)

JAMES  
 (MIDDLE)

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

Agency Name

Division, Board, Department, District, if applicable

Your Position

SAN FRANCISCO ASSESSMENT APPEALS BOARD

ALTERNATE

► If filing for multiple positions, list below or on an attachment.

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

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

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

State

Judge (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, 2010, through December 31, 2010.

-or-

The period covered is \_\_\_\_\_ through December 31, 2010.

Leaving Office: Date Left \_\_\_\_\_  
 (Check one)

The period covered is January 1, 2010, through the date of leaving office.

Assuming Office: Date \_\_\_\_\_

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

Candidate: Election Year 2011

Office sought, if different than Part 1: \_\_\_\_\_

**4. Schedule Summary**

Check applicable schedules or "None."

► Total number of pages including this cover page: \_\_\_\_\_

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

LOMBARD

SAN FRANCISCO CA

94123

DAYTIME TELEPHONE NUMBER

E-MAIL ADDRESS

(415) \_\_\_\_\_

@LOMBARD.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

MARCH 10, 2011  
 (month, day, year)

Signature

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

**SCHEDULE A-1  
Investments**

Stocks, Bonds, and Other Interests  
(Ownership Interest is Less Than 10%)  
Do not attach brokerage or financial statements.

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
E. Campaña

▶ NAME OF BUSINESS ENTITY  
RIMM

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Electronics

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:  
3 / 10 / 10     \_\_\_\_\_ / \_\_\_\_\_ / 10  
 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 Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 10     \_\_\_\_\_ / \_\_\_\_\_ / 10  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
SUP CAPITAL

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
INVESTMENT BANKING

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:  
3 / 10 / 10     \_\_\_\_\_ / \_\_\_\_\_ / 10  
 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 Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 10     \_\_\_\_\_ / \_\_\_\_\_ / 10  
 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 Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 10     \_\_\_\_\_ / \_\_\_\_\_ / 10  
 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 Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 10     \_\_\_\_\_ / \_\_\_\_\_ / 10  
 ACQUIRED                      DISPOSED

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



# SCHEDULE A-2

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

(Ownership Interest is 10% or Greater)

Name \_\_\_\_\_

#### ▶ 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	
<b>FAIR MARKET VALUE</b> <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	<b>IF APPLICABLE, LIST DATE:</b> <div style="display: flex; justify-content: space-around;"> <div> <input type="checkbox"/> <u>   </u>/<u>   </u>/<u>   </u> <b>10</b> ACQUIRED         </div> <div> <input type="checkbox"/> <u>   </u>/<u>   </u>/<u>   </u> <b>10</b> DISPOSED         </div> </div>
<b>NATURE OF INVESTMENT</b> <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 |   |

#### ▶ 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 \_\_\_\_\_

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

#### ▶ 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	
<b>FAIR MARKET VALUE</b> <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	<b>IF APPLICABLE, LIST DATE:</b> <div style="display: flex; justify-content: space-around;"> <div> <input type="checkbox"/> <u>   </u>/<u>   </u>/<u>   </u> <b>10</b> ACQUIRED         </div> <div> <input type="checkbox"/> <u>   </u>/<u>   </u>/<u>   </u> <b>10</b> DISPOSED         </div> </div>
<b>NATURE OF INVESTMENT</b> <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 |   |

#### ▶ 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 \_\_\_\_\_

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

Comments: I AM A REAL ESTATE BROKER FOR CALDWELL BANK  
BUT HAVE NO INVESTMENT IN COMPANY

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

Name  
E. Campa

▶ STREET ADDRESS OR PRECISE LOCATION  
HOFFMAN AVE

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:  
 ACQUIRED     /     / 10      DISPOSED     /     / 10

NATURE OF INTEREST  
 Ownership/Deed of Trust       Easement  
 Leasehold       Other  
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.  
ELIKA ETOMAD

▶ STREET ADDRESS OR PRECISE LOCATION

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:  
 ACQUIRED     /     / 10      DISPOSED     /     / 10

NATURE OF INTEREST  
 Ownership/Deed of Trust       Easement  
 Leasehold       Other  
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 C**  
**Income, Loans, & Business**  
**Positions**  
 (Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

Name  
E. Campana

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
CROWN BANKER

ADDRESS (Business Address Acceptable)  
1801 COMBARD ST, SP

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
REAL ESTATE SALES

YOUR BUSINESS POSITION  
REAL ESTATE BROKER

GROSS INCOME RECEIVED  
 \$500 - \$1,000     \$1,001 - \$10,000  
 \$10,001 - \$100,000     OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
 Salary     Spouse's or registered domestic partner's income  
 Loan repayment     Partnership  
 Sale of \_\_\_\_\_  
(Property, car, boat, etc.)  
 Commission or  Rental Income, list each source of \$10,000 or more  
 Other \_\_\_\_\_  
(Describe)

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
KASER PERMANENTE

ADDRESS (Business Address Acceptable)  
2200 2238 GARDY BLVD

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
MEDICAL ASSISTANT

YOUR BUSINESS POSITION  
 \_\_\_\_\_

GROSS INCOME RECEIVED  
 \$500 - \$1,000     \$1,001 - \$10,000  
 \$10,001 - \$100,000     OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
 Salary     Spouse's or registered domestic partner's income  
 Loan repayment     Partnership  
 Sale of \_\_\_\_\_  
(Property, car, boat, etc.)  
 Commission or  Rental Income, list each source of \$10,000 or more  
 Other MILITARY WORKS FOR KASER  
(Describe)

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

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\* \_\_\_\_\_

ADDRESS (Business Address Acceptable) \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_

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

INTEREST RATE \_\_\_\_\_%     None

TERM (Months/Years) \_\_\_\_\_

SECURITY FOR LOAN  
 None     Personal residence  
 Real Property \_\_\_\_\_  
Street address  
 \_\_\_\_\_  
City  
 Guarantor \_\_\_\_\_  
 Other \_\_\_\_\_  
(Describe)

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

**Assessment Appeals Board**  
 City and County of San Francisco  
 (415) 554-5184 Fax (415) 554-5163



City Hall, Room 244  
 1 Dr. Carlton B. Goodlett Place  
 San Francisco, CA 94102-4697

RECEIVED  
 BOARD OF SUPERVISORS  
 SAN FRANCISCO  
 APR 6 AM 8:58

*Complete and return this original Application to the Clerk of the Board of Supervisors*

Application for Appointment to: Board 1 or Board 1 alternate  
 (Please circle one) Board 2 or Board 2 alternate

Name: Shawn Ridgell Home Address: Broderick  
 City: San Francisco State: CA Zip code: 94115  
 Business Address: 2128 Broadway City: Oakland State: CA Zip code: 94612  
 Home Phone: (415) \_\_\_\_\_ Work Phone: (510) 986-1300 Fax #: (510) 986-1301  
 Pager #: \_\_\_\_\_ E-Mail Address: @aol.com

Are you a United States citizen, or a resident alien who is eligible for and has applied for citizenship?  
 Yes  No

Have you ever been convicted of a felony in this state, or convicted of any offense which, if committed in this state, would be a felony?  Yes  No  
 (If yes, please attach a statement describing the offense(s) for which you have been convicted, the date of the conviction(s), and the court(s) that convicted you.)

*Pursuant to California Revenue and Taxation Code Section 1624, the following qualifications are required:*  
 A person shall not be eligible for nomination for membership on an assessment appeals board unless he or she has a minimum of five years' professional experience in this state as one of the following: certified public accountant or public accountant, licensed real estate broker, attorney, or property appraiser accredited by a nationally recognized professional organization, or property appraiser certified by either the Office of Real Estate Appraiser or by the State Board of Equalization. Documentation of qualifying experience must be submitted with this application form. This requirement does not apply to incumbent board members nominated for appointment to their same seats.

Please state your qualifications: I have twelve years of experience as an attorney, and I have experience as an arbitrator.

Please state your business and/or professional experience: I am the managing partner of the law firm Ridgell + Lawler LLP.

Occupation: Attorney Education: B.S., Juris Doctorate

Civic Activities: USF Alumni Board member, ALRP Volunteer Attorney.

Ethnicity (optional): \_\_\_\_\_ Sex (optional):  M  F

Other Personal Information (optional) \_\_\_\_\_

Would you be able to attend Day Meetings?  Yes  No Night meetings?  Yes  No

How many days a week would you be available for hearings? 3

Have you attended an Assessment Appeals Board meeting?  Yes  No

Appearance before the **RULES COMMITTEE** is a requirement before any appointment can be made.  
 Please Note: Your application will be retained for one year.

Date: 4/14/11 Applicant's Signature: [Signature]

For Office Use Only: Appointed Board #: \_\_\_\_\_ Seat #: \_\_\_\_\_ Term Expires: \_\_\_\_\_

SHAWN RIDGELL  
BRODERICK STREET  
SAN FRANCISCO, CA 94117  
TELEPHONE (415) \_\_\_\_\_  
Email: \_\_\_\_\_@aol.com

**EDUCATION**

**UNIVERSITY OF SAN FRANCISCO SCHOOL OF LAW**

Juris Doctor Degree, May 1996  
Staff Member, *Maritime Law Journal*  
Tutor in the *Academic Support Program*

**UNIVERSITY OF SAN FRANCISCO**

Bachelor of Science in Business Administration, May 1991  
Member of the *Disciplinary Hearing Committee*  
Named *Who's Who Among Students in American Universities*

**WORK  
EXPERIENCE**

**MANAGING ATTORNEY, JANUARY, 2007- PRESENT**

RIDGELL & LAWLOR, LLP; Oakland, CA  
Client representation in civil litigation and business matters. Areas of practice include contracts, consumer litigation, business litigation, business formation, insurance litigation, personal injury, and elder abuse. Client representation in mediations, arbitrations, and trial.

**ARBITRATOR, JANUARY, 2008-PRESENT**

FINANCIAL INDUSTRY REGULATORY AUTHORITY (FINRA);  
San Francisco, CA  
Responsible for hearing and deciding disputes arising out of breach of contract and employment law matters within the securities industry. Reviewed pleadings and other documents in evaluating disputes. Issued rulings on discovery matters.

**ATTORNEY, 2001-2006**

CHARLES SCHWARTZ, P.C.; Oakland, CA  
Client representation in civil litigation and business matters. Areas of practice include contracts, consumer litigation, business litigation, business formation, insurance litigation, personal injury, and elder abuse. Represented clients in mediations, arbitrations, administrative hearings, and trial. Assumed sole responsibility for own case files.

**LEGAL EDITOR, 1999-2006**

CONTINUING EDUCATION OF THE BAR; Oakland, CA  
Conducted extensive legal research on various legal subjects, including areas involving business law, civil litigation, real property, and estate planning. in editing legal publications.

**ATTORNEY, 1999-2001**

SHAWN RIDGELL, ATTORNEY AT LAW; San Francisco, CA  
Client representation in civil litigation and business matters.

**LAW CLERK, 1997-1998**

LAW OFFICES OF JOHN D. WINER; San Francisco, CA  
Participated in Civil discovery, including preparing clients for Deposition testimony. Drafted legal memoranda.

**LAW CLERK, 1996-1997**

FRANCOIS SORBA, ATTORNEY AT LAW; San Mateo, CA

Conducted legal research on real estate and construction matters. Drafted discovery requests and legal memoranda.

**LAW CLERK, FEBRUARY 1996 - MAY, 1996**

RICE, FOWLER, BOOTH, & BANNING; San Francisco, CA

Participant in the law firm's externship program. Conducted legal research on maritime issues. Drafted Motions and legal memoranda. Attended depositions.

**LAW CLERK, JUNE 1995- NOVEMBER 1995**

RICHTER, SENN & PALUMBO; San Francisco, CA

Conducted legal research on real estate, construction, and business matters. Drafted Motions and legal memoranda.

**PROFESSIONAL  
ASSOCIATIONS**

San Francisco Bar Association, Member  
Alameda County Bar Association, Member  
California Bar Association, Member

**VOLUNTEER  
ACTIVITIES**

Volunteer Attorney, Bar Association of San Francisco  
Volunteer Attorney, AIDS Legal Referral Service (ALRP)  
University of San Francisco Alumni Board of Directors

**AWARDS**

Outstanding Volunteer in Public Service Award, Bar Association of San Francisco, 2004

Award for Outstanding Volunteer, AIDS Legal Referral Service, 2009

RIDGELL & LAWLOR LLP  
ATTORNEYS AT LAW  
2128 BROADWAY  
OAKLAND, CALIFORNIA 94612

SHAWN RIDGELL  
NANCY N. LAWLOR

TELEPHONE  
(510) 986-1300  
FACSIMILE  
(510) 986-1301  
E-MAIL  
Sridgell@aol.com

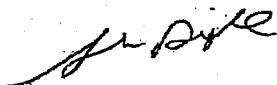
April 5, 2011

Assessment Appeals Board  
City & County of San Francisco  
City Hall, Room 405  
1 Dr. Carlton B. Goodlett Place  
San Francisco, CA 94102


Dear Assessment Appeals Board:

I am applying for an appointment to the assessment appeals board. Enclosed, please find my application for appointment and my resume. Thank you for your consideration.

Sincerely,



Shawn Ridgell  
SR:r  
Enclosures

RECEIVED  
BOARD OF SUPERVISORS  
SAN FRANCISCO  
2011 APR -6 AM 8:57  
BY 

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

Date Received  
 Official Use Only

RECEIVED  
 BOARD OF SUPERVISORS  
 SAN FRANCISCO  
 2011 SEP 8 AM 8:32

Please type or print in ink.

NAME OF FILER (LAST) Ridgell (FIRST) Sharon (MIDDLE) RL

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

Agency Name Assessment Appeals Board  
 Division, Board, Department, District, if applicable Board of Supervisors Your Position Assessment Board member

► If filing for multiple positions, list below or on an attachment.

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

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

State  Judge (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, 2010, through December 31, 2010. -or-  
 The period covered is \_\_\_\_\_ through December 31, 2010.  
 Assuming Office: Date \_\_\_\_\_  
 Candidate: Election Year \_\_\_\_\_ Office sought, if different than Part 1: \_\_\_\_\_  
 Leaving Office: Date Left \_\_\_\_\_ (Check one)  
 The period covered is January 1, 2010, through the date of leaving office.  
 The period covered is \_\_\_\_\_ through the date of leaving office.

**4. Schedule Summary**

Check applicable schedules or "None."  
 Schedule A-1 - Investments - schedule attached  
 Schedule A-2 - Investments - schedule attached  
 Schedule B - Real Property - schedule attached  
 Schedule C - Income, Loans, & Business Positions - schedule attached  
 Schedule D - Income - Gifts - schedule attached  
 Schedule E - Income - Gifts - Travel Payments - schedule attached  
 -or-  
 None - No reportable interests on any schedule

► Total number of pages including this cover page: 2

**5. Verification**

MAILING ADDRESS STREET CITY STATE ZIP CODE  
 (Business or Agency Address Recommended - Public Document)  
 \_\_\_\_\_ Broadway Oakland CA 94612  
 DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS  
 (510) \_\_\_\_\_ @aol.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 9/6/11 Signature [Signature]  
 (month, day, year) (File the originally signed statement with your filing official.)



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

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name Shawn R. Zsell
---

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
Ridgell + Lawlor LLP

ADDRESS (Business Address Acceptable)  
Law Firm

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Attorney / Partner

YOUR BUSINESS POSITION  
 \_\_\_\_\_

GROSS INCOME RECEIVED  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
 Salary     Spouse's or registered domestic partner's income  
 Loan repayment     Partnership  
 Sale of \_\_\_\_\_  
(Property, car, boat, etc.)  
 Commission or     Rental Income, list each source of \$10,000 or more  
 \_\_\_\_\_  
 Other \_\_\_\_\_  
(Describe)

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
 \_\_\_\_\_

ADDRESS (Business Address Acceptable)  
 \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 \_\_\_\_\_

YOUR BUSINESS POSITION  
 \_\_\_\_\_

GROSS INCOME RECEIVED  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
 Salary     Spouse's or registered domestic partner's income  
 Loan repayment     Partnership  
 Sale of \_\_\_\_\_  
(Property, car, boat, etc.)  
 Commission or     Rental Income, list each source of \$10,000 or more  
 \_\_\_\_\_  
 Other \_\_\_\_\_  
(Describe)

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

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*	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
_____		_____
HIGHEST BALANCE DURING REPORTING PERIOD		City
<input type="checkbox"/> \$500 - \$1,000		
<input type="checkbox"/> \$1,001 - \$10,000	<input type="checkbox"/> Guarantor _____	
<input type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> OVER \$100,000	<input type="checkbox"/> Other _____	(Describe)

Comments: I have not received any loans.

**Assessment Appeals Board**  
City and County of San Francisco  
(415) 554-5184 Fax (415) 554-5163



City Hall, Room 244  
1 Dr. Carlton B. Goodlett Place  
San Francisco, CA 94102-4697

*Complete and return this original Application to the Clerk of the Board of Supervisors*

Application for Appointment to:  
(Please circle one)

Board 1 or  
Board 2

Board 1 alternate  
Board 2 alternate

Enter your name, mailing address and daytime telephone number in the spaces provided. Because this form is a document available for public review, you may list your business/office address, telephone number and e-mail address in lieu of your home address or other personal contact information.

Do you authorize release of your private/personal information?  yes  no

Name: Joseph K. Tham Home Address: \_\_\_\_\_

City: San Francisco State: CA Zip code: \_\_\_\_\_

Business Address: 1145 Market Street, 7-46 City: SF State: CA Zip Code: 94103

Home Phone 415-8 Work Phone: 415-487-5212 Fax #: \_\_\_\_\_

Pager #: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_@yahoo.com

Are you a United States citizen, or a resident alien who is eligible for and has applied for citizenship?  Yes  No

Have you ever been convicted of a felony in this state, or convicted of any offense which, if committed in this state, would be a felony?  Yes  No

(If yes, please attach a statement describing the offense(s) for which you have been convicted, the date of the conviction(s), and the court(s) that convicted you.)

**Pursuant to Ordinance No. 393-98 the following qualifications are required:**

**A person shall not be eligible for nomination for membership on an assessment appeals board unless he or she has a minimum of five years' professional experience in this state as one of the following: certified public accountant or public accountant, licensed real estate broker, attorney, or property appraiser accredited by a nationally recognized professional organization, or property appraiser certified by either the Office of Real Estate Appraiser or by the State Board of Equalization. Documentation of qualifying experience must be submitted with this application form. This requirement does not apply to incumbent board members nominated for appointment to their same seats.**

Please state your qualifications: I have been serving on Board No. 2 as an alternate member since 2002 and was reappointed to the same seat in 2008.

Please state your business and/or professional experience: 25+ years of real estate sales, appraisals, leasing and property management. Real Estate investment analysis, cash flows and feasibility studies.

Occupation: Real Property Officer / Analyst Education: Post Graduate - JD

Civic Activities: Project Pull Mentor; Project Safe Investigator

Ethnicity (optional): Asian Sex (optional):  M  F

Other Personal Information (optional) \_\_\_\_\_

Would you be able to attend Day Meetings?  Yes  No Night meetings?  Yes  No

How many days a week would you be available for hearings? 1-3

Have you attended an Assessment Appeals Board meeting?  Yes  No

**Appearance before the RULES COMMITTEE is a requirement before any appointment can be made.**

**Please Note:** Your application will be retained for one year.

Date: 08/03/11

Applicant's Signature: \_\_\_\_\_

For Office Use Only: Appointed to Board #: \_\_\_\_\_ Seat #: \_\_\_\_\_ Term Expires: \_\_\_\_\_

2011 APR -1 PM 3:04

2011 APR -1 AM 10:38

Please type or print in ink.

NAME OF FILER (LAST) THAM (FIRST) Joseph (MIDDLE) K.

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

Agency Name San Francisco Public Utilities Commission  
 Division, Board, Department, District, if applicable Real Estate Services  
 Your Position Real Property Officer  
 Agency: San Francisco Assessment Appeals Board Position: Alternate Member

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

State  Judge (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, 2010, through December 31, 2010.  
 -or-  
 The period covered is \_\_\_\_\_ through December 31, 2010.  
 Assuming Office: Date \_\_\_\_\_  
 Candidate: Election Year \_\_\_\_\_ Office sought, if different than Part 1: \_\_\_\_\_  
 Leaving Office: Date Left \_\_\_\_\_ (Check one)  
 The period covered is January 1, 2010, through the date of leaving office.  
 The period covered is \_\_\_\_\_ through the date of leaving office.

**4. Schedule Summary**

Check applicable schedules or "None."  
 Schedule A-1 - Investments - schedule attached  
 Schedule A-2 - Investments - schedule attached  
 Schedule B - Real Property - schedule attached  
 Schedule C - Income, Loans, & Business Positions - schedule attached  
 Schedule D - Income - Gifts - schedule attached  
 Schedule E - Income - Gifts - Travel Payments - schedule attached  
 -or-  
 None - No reportable interests on any schedule

**5. Verification**

MAILING ADDRESS STREET CITY STATE ZIP CODE  
 (Business or Agency Address Recommended - Public Document)  
1145 Market Street, 7-46 San Francisco CA 94103  
 DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS  
(.415 ) @yahoo.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: 03/08/11 Signature [Signature]  
 (month, day, year) (File the originally signed statement with your filing official.)

Name

THAM, J.

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

STREET ADDRESS OR PRECISE LOCATION  
4253-57 18th Street

CITY  
San Francisco

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  / / 10 DISPOSED  / / 10

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.  
Scott Lauze, MD, Gregory Wells, Ph.D. and Stephen Morris

STREET ADDRESS OR PRECISE LOCATION  
2910 Anza Street

CITY  
San Francisco

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  / / 10 DISPOSED  / / 10

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.  
Andrew Stancliffe and Jacob Dornbush

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



**Assessment Appeals Board**  
 City and County of San Francisco  
 (415) 554-5184 Fax (415) 554-5163



City Hall, Room 244  
 1 Dr. Carlton B. Goodlett Place  
 San Francisco, CA 94102-4697

Complete and return this original Application to the Clerk of the Board of Supervisors **RECEIVED**

JAN 11 2011

Assessment Appeals Board

Application for Appointment to: Board 1 or Board 1 alternate  
 (Please circle one) Board 2 or Board 2 alternate

Name: Tulip Yeh Home Address: 28 Ave

City: San Francisco State: CA Zip code: 94121

Business Address: 1448 Taraval St City: San Francisco State: CA Zip code: 94121

Home Phone 415- Work Phone: 415-350-8908 Fax #: 415-752-2554

Pager #: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Are you a United States citizen, or a resident alien who is eligible for and has applied for citizenship?  
 Yes  No

Have you ever been convicted of a felony in this state, or convicted of any offense which, if committed in this state, would be a felony?  Yes  No  
 (If yes, please attach a statement describing the offense(s) for which you have been convicted, the date of the conviction(s), and the court(s) that convicted you.)

*Pursuant to California Revenue and Taxation Code Section 1624, the following qualifications are required:  
 A person shall not be eligible for nomination for membership on an assessment appeals board unless he or she has a minimum of five years' professional experience in this state as one of the following: certified public accountant or public accountant, licensed real estate broker, attorney, or property appraiser accredited by a nationally recognized professional organization, or property appraiser certified by either the Office of Real Estate Appraiser or by the State Board of Equalization. Documentation of qualifying experience must be submitted with this application form. This requirement does not apply to incumbent board members nominated for appointment to their same seats.*

Please state your qualifications: Licensed real estate broker since 1993  
Licensed Supervisor principal S26 1994 - 2008

Please state your business and/or professional experience: Real Estate, Financial Planning,  
Insurance, Appraisals, Accounting

Occupation: Real Estate broker Education: BA

Civic Activities: Church functions

Ethnicity (optional): Chinese Sex (optional):  M  F

Other Personal Information (optional) \_\_\_\_\_

Would you be able to attend Day Meetings?  Yes  No Night meetings?  Yes  No  
 How many days a week would you be available for hearings? 5-6  
 Have you attended an Assessment Appeals Board meeting?  Yes  No

Appearance before the **RULES COMMITTEE** is a requirement before any appointment can be made.  
 Please Note: Your application will be retained for one year.

Date: 1-1-11 Applicant's Signature: Tulip Yeh

For Office Use Only: Appointed Board #: \_\_\_\_\_ Seat #: \_\_\_\_\_ Term Expires: \_\_\_\_\_

**STATE OF CALIFORNIA  
DEPARTMENT OF REAL ESTATE**

The license information shown below represents public information taken from the Department of Real Estate's database at the time of your inquiry. It will not reflect pending changes which are being reviewed for subsequent database updating.

Also, the license information provided includes formal administrative actions that have been taken against licensees pursuant to the Business and Professions Code and/or the Administrative Procedure Act. All of the information displayed is public information. Although the business and mailing addresses of real estate licensees are included, this information is not intended for mass mailing purposes.

License information taken from records of the Department of Real Estate on 12/29/2010 3:47:32 PM

---

**License Type:** BROKER

**Name:** Yeh, Tulip

**Mailing Address:** —, TARAVAL STREET  
SAN FRANCISCO, CA 94116

**License ID:** 01141628

**Expiration Date:** 08/31/13

**License Status:** LICENSED

**Salesperson License Issued:** 07/15/92 (Unofficial -- taken from secondary records)

**Broker License Issued:** 09/01/93 (Unofficial -- taken from secondary records)

**Former Name(s):** Yeh, Tulip Yun-Ching

**Main Office:** 1448 TARAVAL STREET SAN FRANCISCO, CA 94116

**DBA**

Complete Financial Investor Services  
ACTIVE AS OF 08/06/1999

Help-U-Sell Golden Gate Realty  
ACTIVE FROM 01/31/2003 TO 08/26/2009

Yeh & Associates Real Estate Group  
ACTIVE FROM 03/30/1994 TO 03/14/1995

**Branches:** NO CURRENT BRANCHES

**Affiliated Licensed Corporation(s):** NO CURRENT AFFILIATED CORPORATIONS

**Comment:** NO DISCIPLINARY ACTION

NO OTHER PUBLIC COMMENTS

## TULIP'S RESUME

### Experiences in USA

1999 – Present	Complete Financial Investor Services (Real Estate Broker)
1994 - 2008	Complete Financial Investor Services (Security Supervisor, S26 licensee)
2003 - 2006	Help – U – Sell Golden Gate Realty (Real Estate Broker)
1993 – 1995 & 1997 - 2002	Yeh & Associates Real Estate Group (Real Estate Broker)
1995 – 1997	Mason McDuffey Realty (Real Estate Broker Associate)
1991 - 1993	Bay View Realty (Real Estate Broker assistant, Real Estate Agent)
1985 - 1990	Home Appraisal (Real Estate Appraiser)
1984 – 1985	Chen Import & Export Co. (Manager)
1983 - 1984	New York Life Insurance Co. (Insurance Assistant)
1982 – 1983	Lane & Associates (Accounting Clerk)

1972

Graduated from Taiwan Taipei Ming Chuang University

As an Appraiser

Helped a client to appeal the assessment tax

As a Broker  
(Besides Buy & Sell)

Help a client to recover losses from prior agent's fraudulent acts;  
help clients to deal with tenant problems; without hiring any  
lawyer.

Enjoy helping people and advising people to do the right things.





STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Date Received
Official Use Only

Please type or print in ink.

NAME OF FILER: (LAST) YEH, (FIRST) Tulip (MIDDLE) YC

1. Office, Agency, or Court

Agency Name: San Francisco Accessment Appeals Board
Division, Board, Department, District, if applicable: Board 1 & 2
Your Position: Board member

If filing for multiple positions, list below or on an attachment.

Agency: Position:

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

State, Multi-County, City of San Francisco, Judge (Statewide Jurisdiction), County of San Francisco, Other.

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

Annual: The period covered is January 1, 2010, through December 31, 2010.
Assuming Office: Date
Candidate: Election Year
Leaving Office: Date Left
The period covered is January 1, 2010, through the date of leaving office.

4. Schedule Summary

Check applicable schedules or "None."
Total number of pages including this cover page: 1
Schedule A-1 - Investments - schedule attached
Schedule A-2 - Investments - schedule attached
Schedule B - Real Property - schedule attached
Schedule C - Income, Loans, & Business Positions - schedule attached
Schedule D - Income - Gifts - schedule attached
Schedule E - Income - Gifts - Travel Payments - schedule attached
None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS: araval Street, San Francisco, CA, 94116
DAYTIME TELEPHONE NUMBER: (415)
E-MAIL ADDRESS: @yahoo.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: 9-1-2011
Signature: Tulip Yeh

Assessment Appeals Board  
City and County of San Francisco  
(415) 554-5184 Fax (415) 554-5163



City Hall, Room 244  
1 Dr. Carlton B. Goodlett Place  
San Francisco, CA 94102-4697

Complete and return this original Application to the Clerk of the Board of Supervisors

Application for Appointment to:  
(Please circle one)

Board 1 or Board 2 or Board 1 alternate or Board 2 alternate

Enter your name, mailing address and daytime telephone number in the spaces provided. Because this form is a document available for public review, you may list your business/office address, telephone number and e-mail address in lieu of your home address or other personal contact information.

Do you authorize release of your private/personal information?  yes  no

Name: COLIN V. GALLAGHER Home Address: Buxton St #217

City: San Francisco State: CA Zip code: 94107

Business Address: 225 Bush St #1600 City: San Francisco State: CA Zip Code: 94104

Home Phone: (415) Work Phone: (415) 439-8365 Fax #: (415) 439-8371

Pager #: E-Mail Address: @easy.com

Are you a United States citizen, or a resident alien who is eligible for and has applied for citizenship?  Yes  No

Have you ever been convicted of a felony in this state, or convicted of any offense which, if committed in this state, would be a felony?  Yes  No

(If yes, please attach a statement describing the offense(s) for which you have been convicted, the date of the conviction(s), and the court(s) that convicted you.)

Pursuant to Ordinance No. 393-98 the following qualifications are required:  
A person shall not be eligible for nomination for membership on an assessment appeals board unless he or she has a minimum of five years' professional experience in this state as one of the following: certified public accountant or public accountant, licensed real estate broker, attorney, or property appraiser accredited by a nationally recognized professional organization, or property appraiser certified by either the Office of Real Estate Appraiser or by the State Board of Equalization. Documentation of qualifying experience must be submitted with this application form. This requirement does not apply to incumbent board members nominated for appointment to their same seats.

Please state your qualifications: LICENSED ATTORNEY IN THE STATE OF CALIFORNIA (C.S.B. MEMBER NO. 209543)

Please state your business and/or professional experience: SEE ATTACHED RESUME

Occupation: ATTORNEY Education: J.D. U.C. Hastings 2000

Civic Activities: B.A. (cum laude) Harvard College

Ethnicity (optional): CANADIAN Sex (optional):  M  F

Other Personal Information (optional)

Would you be able to attend Day Meetings?  Yes  No Night meetings?  Yes  No

How many days a week would you be available for hearings? Have you attended an Assessment Appeals Board meeting?  Yes  No

Appearance before the RULES COMMITTEE is a requirement before any appointment can be made. Please Note: Your application will be retained for one year.

Date: 9/2/09 Applicant's Signature: C.V. Gallagher

For Office Use Only: Appointed to Board #: Seat #: Term Expires:

Colin Gallagher  
— Bluxome Street #217  
San Francisco, CA 94107  
(415) —  
Email: — @easy.com  
Cal. State Bar Member # 209543

**EDUCATION:**

University of California, Hastings College of the Law. J.D. (received May, 2000).  
Harvard University. B.A. *cum laude* in History and Literature.

**PROFESSIONAL EXPERIENCE:**

**MANAGING ATTORNEY** December 2007 to present  
**LOUIE & STETTLER**  
225 Bush Street, Ste 1600, San Francisco, CA 94104

**ASSOCIATE ATTORNEY** April 2004 to October, 2007  
**ADELSON TESTAN BRUNDO & POPALARDO**  
180 Montgomery Street, Ste 1000, San Francisco, CA 94104

**ASSOCIATE ATTORNEY** May 2003 to April 2004  
**STOCKWELL HARRIS WIDOM & WOOLVERTON LLP**  
222 Kearney Street, 9<sup>th</sup> Floor, San Francisco, CA 94108

**ASSOCIATE ATTORNEY** November 2002 to May 2003  
**GRANCELL LEOVITZ STANDER BARNES & REUBENS LLP**  
7250 Redwood Blvd, Suite 370, Novato, CA 94945

**ASSOCIATE ATTORNEY** May 2002 to October 2002  
**PULLEY & COHEN LLP**  
1333 Broadway, Suite 1700, Oakland, CA 94612

**STAFF COUNSEL** July 2001 to May 2002  
**STATE COMPENSATION INSURANCE FUND**  
1275 Market Street, San Francisco, CA 94103

**ASSOCIATE ATTORNEY** January 2001 to July 2001  
**HARBINSON, TUNE, MANGOLD & KASSELIK**  
100 Bush Street, Suite 1200, San Francisco, CA 94104

**PROFESSIONAL MEMBERSHIPS:**

Member of the Workers' Compensation section of the California State Bar. Admitted to the U.S. District Court, Northern District of California.

## ATTORNEY SEARCH

**Colin Gallagher - #209543**

### Current Status: Active

This member is active and may practice law in California.

See below for more details.

### Profile Information

<b>Bar Number</b>	209543	<b>Phone Number</b>	(415) _____
<b>Address</b>	Loise Stettler & Liebherr 3000 Bush St #1600 San Francisco, CA 94104	<b>Fax Number</b>	(415) 439-8371
		<b>e-mail</b>	_____@loufelaw.net
<b>District</b>	District 4	<b>Undergraduate School</b>	Harvard Univ; Cambridge MA
<b>County</b>	San Francisco	<b>Law School</b>	UC Hastings COL; San Francisco CA
<b>Sections</b>	Trusts & Estates Worker's Compensation		

### Status History

Effective Date	Status Change
Present	Active
12/4/2000	Admitted to The State Bar of California

Explanation of member status

### Actions Affecting Eligibility to Practice Law

#### Disciplinary and Related Actions

This member has no public record of discipline.

#### Administrative Actions

This member has no public record of administrative actions.

[Start New Search >](#)

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

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BOARD OF SUPERVISORS  
SAN FRANCISCO

2011 SEP -2 PM 4:07

Please type or print in ink.

NAME OF FILER (LAST) GALLAGHER (FIRST) COLIN (MIDDLE) V

1. Office, Agency, or Court

Agency Name ASSESSMENT APPEALS BOARD  
Division, Board, Department, District, if applicable  
Your Position

If filing for multiple positions, list below or on an attachment.

Agency: Position:

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

- State
Multi-County
City of San Francisco
Judge (Statewide Jurisdiction)
County of
Other

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

- Annual: The period covered is January 1, 2010, through December 31, 2010.
Leaving Office: Date Left
Assuming Office: Date
Candidate: Election Year 2011 Office sought, if different than Part 1:

4. Schedule Summary

- Schedule A-1 - Investments
Schedule A-2 - Investments
Schedule B - Real Property
Schedule C - Income, Loans, & Business Positions
Schedule D - Income - Gifts
Schedule E - Income - Gifts - Travel Payments
None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS: BEYONCE STREET #217 SAN FRANCISCO CA 94107
DAYTIME TELEPHONE NUMBER: (415)
E-MAIL ADDRESS: @easy.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: SEPT 2, 2011
Signature: [Handwritten Signature]

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

Name  
COLIN GALLAGHER

STREET ADDRESS OR PRECISE LOCATION  
BLUXOME STRESS #217

CITY  
SAN FRANCISCO, CA

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 1/10 DISPOSED 1/10

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  
 \_\_\_\_\_

CITY  
 \_\_\_\_\_

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 1/10 DISPOSED 1/10

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

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name: COLIN GALLAGHER

1. INCOME RECEIVED
NAME OF SOURCE OF INCOME: BRADY VORWERCK RIDER & CASPINO
ADDRESS: 1855 GATEWAY BLVD #650
BUSINESS ACTIVITY: CONCORD, CA 94520
YOUR BUSINESS POSITION: ASSOCIATE ATTORNEY
GROSS INCOME RECEIVED: OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED: Salary

1. INCOME RECEIVED
NAME OF SOURCE OF INCOME:
ADDRESS:
BUSINESS ACTIVITY, IF ANY, OF SOURCE:
YOUR BUSINESS POSITION:
GROSS INCOME RECEIVED:
CONSIDERATION FOR WHICH INCOME WAS RECEIVED:

2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER:
ADDRESS (Business Address Acceptable):
BUSINESS ACTIVITY, IF ANY, OF LENDER:
HIGHEST BALANCE DURING REPORTING PERIOD:
\$500 - \$1,000
\$1,001 - \$10,000
\$10,001 - \$100,000
OVER \$100,000

INTEREST RATE: % None
TERM (Months/Years):
SECURITY FOR LOAN:
None
Personal residence
Real Property: Street address, City
Guarantor:
Other: (Describe)

Comments:

San Francisco  
BOARD OF SUPERVISORS

Date Printed: September 6, 2011

Date Established: December 24, 1998

Active

**ASSESSMENT APPEALS BOARD NO. 2**

**Contact and Address:**

Dawn Duran  
Assessment Appeals Board  
City Hall, Room 405

Phone: (415) 554-6778

Fax: (415) 554-6775

Email: Dawn.Duran@sfgov.org

**Authority:**

Administrative Code Chapter 2B et seq.; Added by Ordinance 37-67, approved 1/31/67; amended by Ordinance No. 393-98, approved 12/24/1998; amended by Ordinance No. 273-99, approved 10/27/99.

**Board Qualifications:**

The Assessment Appeals Board No. 2 consists of eight members, five regular members, and three alternate members all of whom are appointed by the Board of Supervisors.

No person may concurrently hold a seat on Assessment Appeals Board No. 1 and a seat on Assessment Appeals Board No. 2.

The Board members' term of office is three years, beginning on the first Monday in September. In the event of a vacancy, the newly appointed member shall serve for the remainder of the unexpired term.

The Board shall have the following qualifications as stated in the eligibility criteria set forth in Section 1624.05 of the California Revenue and Taxation Code as follows: Must have a minimum of five years professional experience in the State of California as one of the following: Certified Public Accountant (CPA) or Public Accountant (PA); licensed Real Estate Broker; Attorney; or a Property Appraiser accredited by a nationally recognized professional organization, or Property Appraiser certified by the Office of Real Estate Appraiser; or he or she is a current member of an assessment appeals board.

Hearing Officers: The regular and alternate members of the Board shall also serve as hearing

"R Board Description" (Screen Print)



San Francisco  
BOARD OF SUPERVISORS

officers. The Clerk shall designate members to act as hearing officers for particular applications using a rotating system designed to assure that all members with the same priority level, as described in this subsection, have an equal opportunity over time to participate as hearing officers. The Clerk shall designate hearing officers in the following priority order: (a) the alternate members of Assessment Appeals Board No. 2; (b) the alternate members of Assessment Appeals Board No. 1; (c) the regular members of Assessment Appeals Board No. 2; and (d) the regular members of Assessment Appeals Board No. 1. In their capacity as assessment hearing officers, the officers shall serve at the pleasure of and by contract with the Board of Supervisors.

It shall be the duty of each Assessment Appeals Board to equalize the valuation of the taxable property within the City and County for the purposes of taxation in the manner and subject to the limitations contained in Article XIII of the California State Constitution. Assessment Appeals Board No. 2 shall have jurisdiction to only hear applications for reduction for property on the secured or unsecured rolls assessed at less than \$50,000,000, excluding applications involving possessory interests or real property located all or in part within Assessor's Blocks 1 - 876, inclusive, or Assessor's Blocks 3701-3899 inclusive. Except not including residential real property on the secured roll consisting of four units or less that is located all or in part within those blocks.

Report: Pursuant to Section 1639 of the Revenue and Taxation Code, the hearing officer shall prepare a summary report of the proceedings together with a recommendation on the application and shall transmit this report and recommendation to the Clerk of the Board of Supervisors.

Compensation: (\$100 for each one-half day of service.)

Sunset Clause: None

"R Board Description" (Screen Print)

