

File No. 131049

Committee Item No. 10

Board Item No. 17

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Rules Committee

Date October 31, 2013

Board of Supervisors Meeting

Date 11/19/13

Cmte Board

- | | | |
|-------------------------------------|-------------------------------------|--|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Motion |
| <input type="checkbox"/> | <input type="checkbox"/> | Resolution |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Ordinance |
| <input type="checkbox"/> | <input type="checkbox"/> | Legislative Digest |
| <input type="checkbox"/> | <input type="checkbox"/> | Budget and Legislative Analyst Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Youth Commission Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Introduction Form |
| <input type="checkbox"/> | <input type="checkbox"/> | Department/Agency Cover Letter and/or Report |
| <input type="checkbox"/> | <input type="checkbox"/> | MOU |
| <input type="checkbox"/> | <input type="checkbox"/> | Grant Information Form |
| <input type="checkbox"/> | <input type="checkbox"/> | Grant Budget |
| <input type="checkbox"/> | <input type="checkbox"/> | Subcontract Budget |
| <input type="checkbox"/> | <input type="checkbox"/> | Contract/Agreement |
| <input type="checkbox"/> | <input type="checkbox"/> | Form 126 - Ethics Commission |
| <input type="checkbox"/> | <input type="checkbox"/> | Award Letter |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Application |
| <input type="checkbox"/> | <input type="checkbox"/> | Public Correspondence |

OTHER (Use back side if additional space is needed)

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

Completed by: Linda Wong

Date October 28, 2013

Completed by: L.W.

Date 11/7/13

1 [Appointments – Assessment Appeals Board No. 3]
2

3 **Motion appointing Yosef Tahbazof, term ending September 1, 2014, Kristine Nelson,**
4 **term ending September 7, 2015, Shawn Ridgell and Angela Cheung, terms ending**
5 **September 5, 2016, to the Assessment Appeals Board No. 3.**
6

7 MOVED, That the Board of Supervisors of the City and County of San Francisco does
8 hereby appoint the hereinafter designated persons to serve as members of the Assessment
9 Appeals Board No. 3, pursuant to the provisions of the Revenue and Taxation Code, Section
10 1623, and the San Francisco Administrative Code, Sections 2B.1 through 2B.11, for the terms
11 specified:

12 Shawn Ridgell, seat 1, new appointment, must meet the eligibility criteria set forth in
13 California Revenue and Taxation Code, Section 1624.05. Must have a minimum of five years
14 professional experience in the State of California as one of the following: Certified Public
15 Accountant (CPA) or Public Accountant (PA); licensed Real Estate Broker; Attorney; or a
16 Property Appraiser accredited by a nationally recognized professional organization, or
17 Property Appraiser certified by the Office of Real Estate Appraisers, for the unexpired portion
18 of a three-year term ending September 5, 2016.

19 Kristine Nelson, seat 2, new appointment, must meet the eligibility criteria set forth in
20 California Revenue and Taxation Code, Section 1624.05. Must have a minimum of five years
21 professional experience in the State of California as one of the following: Certified Public
22 Accountant (CPA) or Public Accountant (PA); licensed Real Estate Broker; Attorney; or a
23 Property Appraiser accredited by a nationally recognized professional organization, or
24 Property Appraiser certified by the Office of Real Estate Appraisers, for the unexpired portion
25 of a two-year term ending September 7, 2015.

1 Yosef Tahbazof, seat 3, new appointment, must meet the eligibility criteria set forth in
2 California Revenue and Taxation Code, Section 1624.05. Must have a minimum of five years
3 professional experience in the State of California as one of the following: Certified Public
4 Accountant (CPA) or Public Accountant (PA); licensed Real Estate Broker; Attorney; or a
5 Property Appraiser accredited by a nationally recognized professional organization, or
6 Property Appraiser certified by the Office of Real Estate Appraisers, for the unexpired portion
7 of a one-year term ending September 1, 2014.

8 Angela Cheung, seat 4, new appointment, must meet the eligibility criteria set forth in
9 California Revenue and Taxation Code, Section 1624.05. Must have a minimum of five years
10 professional experience in the State of California as one of the following: Certified Public
11 Accountant (CPA) or Public Accountant (PA); licensed Real Estate Broker; Attorney; or a
12 Property Appraiser accredited by a nationally recognized professional organization, or
13 Property Appraiser certified by the Office of Real Estate Appraisers, for the unexpired portion
14 of a three-year term ending September 5, 2016.

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25

Assessment Appeals Board
 City and County of San Francisco
 (415) 554-6778 Fax (415) 554-6775



City Hall, Room 405
 1 Dr. Carlton B. Goodlett Place
 San Francisco, CA 94102-4697

Complete and return this original Application to the Assessment Appeals Board

Application for Appointment to: Board 1 or Board 1 Alternate
 (Please circle one) Board 2 or Board 2 Alternate
Board 3 or Board 3 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: Shawn Ridgell Home Address: Biederick Street
 City: San Francisco State: CA Zip code: 94117
 Business Address: 2128 Broadway City: Oakland State: CA Zip Code: 94612
 Home Phone: 415-... Work Phone: (510) 986-1300 Fax #: (510) 986-1301
 Pager #: N/A 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 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: (1) certified public accountant or public accountant; (2) licensed real estate broker; (3) attorney; or (4) 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 am an attorney with 15 years of experience. I also have 5 years of experience as an arbitrator.

Please state your business and/or professional experience: 15 years of experience as an attorney. Please see attached resume.

Occupation: Attorney Education: B.S., J.O. From USF

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

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

Other Personal Information (optional) _____

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

How many days a week would you be available for hearings? 2-3 How many evenings a week? 1-2

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: 9/19/13 Applicant's Signature: Shawn Ridgell

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

Revised July 2013

SHAWN RIDGELL
— BRODERICK STREET
SAN FRANCISCO, CA 94117
TELEPHONE (415) —
Email — daol.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, administrative hearings, 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. Assisted 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

COVER PAGE

Please type or print in Ink.

NAME OF FILER (LAST) Ridgell (FIRST) Shawn (MIDDLE)

1. Office, Agency, or Court

Agency Name Assessment Appeals Board Board Member
 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 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, 2012, through December 31, 2012.
 -or- The period covered is _____ through December 31, 2012.
 Assuming Office: Date assumed _____ Leaving Office: Date Left _____ (Check one)
 The period covered is January 1, 2012, through the date of leaving office.
 The period covered is _____ through the date of leaving office.
 Candidate: Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None." ► Total number of pages including this cover page: -0-

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 (Business or Agency Address Recommended - Public Document)	STREET	CITY	STATE	ZIP CODE
<u>2128 Broadway</u>	<u>Oakland</u>	<u>CA</u>	<u>94612</u>	
DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS (OPTIONAL)			
<u>(510) 986-1300</u>	<u>advice.com</u>			

I have used all reasonable diligence in preparing this statement. I have reviewed _____ 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 9/19/13 Signature [Signature]
 (month, day, year) (File the originally signed statement with your filing official.)

Wednesday, October 2, 2013

~~THE STATE BAR OF CALIFORNIA~~

ATTORNEY SEARCH

Shawn Ridgell - #201179

Current Status: Active

This member is active and may practice law in California.

See below for more details.

Profile Information

The following information is from the official records of The State Bar of California.

Bar Number:	201179		
Address:	Ridgell & Lawlor LLP 2128 Broadway Oakland, CA 94612 Map it	Phone Number:	(510) 986-1300
		Fax Number:	(510) 986-1301
		e-mail:	_____@aol.com
County:	Alameda	Undergraduate School:	Univ of San Francisco; San Francisco CA
District:	District 1		
Sections:	Business Law	Law School:	U of San Francisco SOL; San Francisco CA

Status History

Effective Date	Status Change
Present	Active
6/7/1999	Admitted to The State Bar of California

Explanation of member status

Actions Affecting Eligibility to Practice Law

Disciplinary and Related Actions

Overview of the attorney discipline system.

This member has no public record of discipline.

Administrative Actions

This member has no public record of administrative actions.

[Start New Search »](#)

Assessment Appeals Board
 City and County of San Francisco
 (415) 554-6778 Fax (415) 554-6775



City Hall, Room 405
 1 Dr. Carlton B. Goodlett Place
 San Francisco, CA 94102-4697

Complete and return this original Application to the Assessment Appeals Board

Application for Appointment to:
 (Please circle one)

Board 1 or Board 1 Alternate
 Board 2 or Board 2 Alternate
 Board 3 or Board 3 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: Kristine Nelson Home Address: 1 Dr. Carlton B. Goodlett Pl # 405
 City: San Francisco State: CA Zip code: 94117
 Business Address: 601 Buena Vista City: SF State: CA Zip Code: 94117
 Home Phone: _____ Work Phone: 415-706-0995 Fax #: _____
 Pager #: _____ E-Mail Address: wnleffers.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: (1) certified public accountant or public accountant; (2) licensed real estate broker; (3) attorney; or (4) 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: Certified Real Estate Appraiser

Please state your business and/or professional experience: Real Estate Appraiser, Chief Appraiser, Review Appraiser, Real Estate Agent

Occupation: Appraiser, Real Estate Agent Education: BA UCLA

Civic Activities: Randall Museum, SPEAK, CSB-School

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

Other Personal Information (optional) _____

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

How many days a week would you be available for hearings? 4 How many evenings a week? 2

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: 9/9/2013 Applicant's Signature: _____

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

Kristy Nelson

~ /@mleffers.com
(415) 706.0995

Skills

Professional Experience

Independent Appraiser and Real Estate Sales Agent

1995- Present

- Appraise apartments, commercial properties, condominiums, income properties and single family residences
- Represent buyers and sellers in real estate transactions
- Lease and manage residential and commercial properties

Senior Staff Real Estate Appraiser, San Francisco Federal, San Francisco, CA

1993-1995

- Appraised apartments, condominiums and income properties
- Planned unit developments and single family residences
- Reviewed apartment and residential appraisals
- Supervised staff reviewers

Regional Chief Appraiser, Foster Ousley Comley, Walnut Creek, CA

1992-1993

- Managed staff reviewers
- Determined final review value for residential properties, condominiums, income properties and planned unit developments
- Provided technical support and training

Independent Appraiser, Johnson O'Neil & Associates; Michael J. Vizzini Associates, Los Angeles, CA

1990-1992

- Prepared narratives for commercial properties and vacant land appraisals
- Appraised apartments, condominiums and residential properties
- Prepared relocation and proposed construction appraisals

Senior Staff Real Estate Appraiser, Home Savings America, Palos Verdes, CA

1986-1991

- Appraised condominiums, planned unit developments and single family residences
- Appraisals ranged in price from \$90,000 to \$4,000,000
- Appraised multi-unit income producing properties
- Reviewed single residences and income property appraisals
- Assisted in office management

Leasing Consultant, Dorn and Company, Los Angeles, CA

1984-1986

- Located office and real estate space for commercial tenants
- Aided prospective tenants in space planning and building design
- Negotiated commercial leases
- Published *San Fernando Valley Commercial Leasing Activity* in WESTERN REAL ESTATE NEWS, December 20, 1986

Licenses

Certified General Appraisal License #AGOO7334

California Real Estate Sales License #00884857

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Date Received
 Official Use Only

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
 Nelson Kristine Ann

1. Office, Agency, or Court

Agency Name
 Assessment appeals Board
 Division, Board, Department, District, if applicable
 Your Position
 Board 3

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

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, 2012, through December 31, 2012.
- or- The period covered is 09 / 01 / 2013 through December 31, 2012.
- Leaving Office: Date Left _____ (Check one)
- The period covered is January 1, 2012, through the date of leaving office.
- Assuming Office: Date assumed _____
- The period covered is _____ through the date of leaving office.
- Candidate: Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary

- Check applicable schedules or "None." ► Total number of pages including this cover page: 8
- Schedule A-1 - Investments - schedule attached Schedule 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)
 1 Dr. Carlton B Goodlett pl #405 San Francisco Ca 94102

DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS (OPTIONAL)
 (415) 706-0995

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 9/10/2013 Signature _____
 (month, day, year) (File the originally signed statement with your filing official.)

FPPC Form 700 (2012/2013)
 FPPC Advice Email: advice@fppc.ca.gov
 FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

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

Kristine Nelson

▶ NAME OF BUSINESS ENTITY
PGE

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
electricity

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:
 ____ / ____ / 12 ____ / ____ / 12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Cisco

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Computers

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

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

IF APPLICABLE, LIST DATE:
 ____ / ____ / 12 ____ / ____ / 12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Intel

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Chip maker

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:
 ____ / ____ / 12 ____ / ____ / 12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Southern Copper

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Copper

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:
 ____ / ____ / 12 ____ / ____ / 12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Hewlett Packard

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Computers

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

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

IF APPLICABLE, LIST DATE:
 ____ / ____ / 12 ____ / ____ / 12
 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:
 ____ / ____ / 12 ____ / ____ / 12
 ACQUIRED DISPOSED

Comments:

FPPC Form 700 (2012/2013) Sch. A-1
 FPPC Advice Email: advice@fppc.ca.gov
 FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

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
Kristine Nelson

1. BUSINESS ENTITY OR TRUST
Leffers Family Trust
Name _____
Address (Business Address Acceptable) _____
Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$0 - \$1,999 / / 12 / / 12
 \$2,000 - \$10,000 ACQUIRED DISPOSED
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

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

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
287 Sanchez Street

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

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000 / / 12 / / 12
 \$10,001 - \$100,000 ACQUIRED DISPOSED
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Yrs. remaining Other _____

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

1. BUSINESS ENTITY OR TRUST
Name _____
Address (Business Address Acceptable) _____
Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$0 - \$1,999 / / 12 / / 12
 \$2,000 - \$10,000 ACQUIRED DISPOSED
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

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

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
565-567 Natoma street

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

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000 / / 12 / / 12
 \$10,001 - \$100,000 ACQUIRED DISPOSED
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Yrs. remaining Other _____

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

Comments: _____

SCHEDULE B
Interests in Real Property
 (Including Rental Income)

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name
 Kristine Nelson

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
 62-64 Moss 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

 / / 12 / / 12
 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

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
 621 Natoma 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

 / / 12 / / 12
 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 commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER* _____

ADDRESS (Business Address Acceptable) _____

BUSINESS ACTIVITY, IF ANY, OF LENDER _____

INTEREST RATE TERM (Months/Years)
 _____ % None

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

Guarantor, if applicable

NAME OF LENDER* _____

ADDRESS (Business Address Acceptable) _____

BUSINESS ACTIVITY, IF ANY, OF LENDER _____

INTEREST RATE TERM (Months/Years)
 _____ % None

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

Guarantor, if applicable

Comments: _____

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name
Kristine Nelson

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
23-25 Moss Street

CITY
San Francisco

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	
<input type="checkbox"/> \$10,001 - \$100,000	<u> / / 12</u> <u> / / 12</u>
<input checked="" type="checkbox"/> \$100,001 - \$1,000,000	ACQUIRED DISPOSED
<input type="checkbox"/> Over \$1,000,000	

NATURE OF INTEREST

Ownership/Deed of Trust Easement

Leasehold _____ _____ Other

Yrs. remaining

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

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
1316-1318 Fulton Street

CITY
San Francisco

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	
<input type="checkbox"/> \$10,001 - \$100,000	<u> / / 12</u> <u> / / 12</u>
<input type="checkbox"/> \$100,001 - \$1,000,000	ACQUIRED DISPOSED
<input checked="" type="checkbox"/> Over \$1,000,000	

NATURE OF INTEREST

Ownership/Deed of Trust Easement

Leasehold _____ _____ Other

Yrs. remaining

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 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)
_____ % <input type="checkbox"/> 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)
_____ % <input type="checkbox"/> None	_____

HIGHEST BALANCE DURING REPORTING PERIOD

\$500 - \$1,000 \$1,001 - \$10,000

\$10,001 - \$100,000 OVER \$100,000

Guarantor, if applicable

Comments: _____

SCHEDULE B Interests in Real Property (Including Rental Income)

Name
Kristine Nelson

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
445-449 Tehama Street

CITY
San Francisco

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000 _____ / _____ / 12 _____ / _____ / 12
 \$10,001 - \$100,000 ACQUIRED DISPOSED
 \$100,001 - \$1,000,000
 Over \$1,000,000

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

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

CITY

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000 _____ / _____ / 12 _____ / _____ / 12
 \$10,001 - \$100,000 ACQUIRED DISPOSED
 \$100,001 - \$1,000,000
 Over \$1,000,000

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 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 <small>FAIR POLITICAL PRACTICES COMMISSION</small>
Name Kristine Nelson

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Real Estate Commission

ADDRESS (Business Address Acceptable)
1669 Page Street

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION
Buyers Agent

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

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

 Other _____
(Describe)

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

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

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

 Other _____
(Describe)

2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

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

NAME OF LENDER'

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

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

INTEREST RATE TERM (Months/Years)

_____ % None _____

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

Comments: _____



Business, Transportation & Housing Agency
OFFICE OF REAL ESTATE APPRAISERS
REAL ESTATE APPRAISER LICENSE

Kristine A. Nelson

has successfully met the requirements for a license as a residential and commercial real estate appraiser in the State of California and is, therefore, entitled to use the title:

“Certified General Real Estate Appraiser”

This license has been issued in accordance with the provisions of the Real Estate Appraisers' Licensing and Certification Law.

OREA APPRAISER IDENTIFICATION NUMBER: AG 007334

Effective Date: May 6, 2013

Date Expires: May 5, 2015

Jim Martin, Director, OREA

3007087



**Board of Supervisors
City and County of San Francisco
1 Dr. Carlton B. Goodlett Place, Room 244
(415) 554-5184 FAX (415) 554-7714**

Application for Boards, Commissions, Committees, & Task Forces

Name of Board, Commission, Committee, or Task Force: Assessment Appeals Board

Seat # or Category (If applicable): N.A. Boards 1-3 (all seats) District: _____

Name: Yosef Tahbazof

Home Address: Burnett Ave, San Francisco Zip: 94131

Home Phone: 415. Occupation: Attorney

Work Phone: 415.922.0200 x 111 Employer: Tahbazof Law Firm

Business Address: 1256 Howard Street, San Francisco Zip: 94103

Business E-Mail: yosef@tahbazoflaw.com Home E-Mail: gmail.com

Pursuant to Charter Section 4.101 (a)2, Boards and Commissions established by the Charter must consist of electors (registered voters) of the City and County of San Francisco. For certain other bodies, the Board of Supervisors can waive the residency requirement.

Check All That Apply:

Registered voter in San Francisco: Yes No If No, where registered: _____

Resident of San Francisco Yes No If No, place of residence: _____

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 was born in San Francisco shortly after my family immigrated from Iran. I have always enjoyed and cared for the city which was one of the main reasons I pursued my legal education at UC Hastings. In my professional capacity, I have had the pleasure of working with a broad spectrum of community members and have often collaborated closely with neighborhood groups as well as community organizations.

Business and/or professional experience:

I have worked in the following capacities: attorney, property manager, tax accountant, and paralegal.

Civic Activities:

I volunteered for Mayor Gavin Newsom and Supervisor Michela Alioto-Pier. I have also enjoyed volunteering at the Shelter Network and Home Away from Homelessness.

Have you attended any meetings of the Board/Commission to which you wish appointment? Yes No

For appointments by the Board of Supervisors, appearance before the RULES COMMITTEE is a requirement before any appointment can be made. *(Applications must be received 10 days before the scheduled hearing.)*

Date: 10.25.2013 Applicant's Signature: (required) 

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 Seat was Vacated: _____

01/20/12

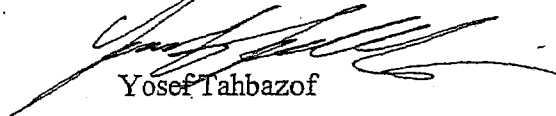
September 9, 2013

Supervisor Norman Yee
Rules Committee Chair
Board of Supervisors
City Hall
1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102

Dear Supervisor Yee:

Please consider the enclosed resume as an application to serve our City in whatever capacity you deem necessary and fitting. Should you have any questions or desire to meet with me, I will make myself available at your convenience.

Sincerely,



Yosef Tahbazof

YOSEF TAHBAZOF

TAHBAZOF LAW FIRM, LLP • 1256 Howard Street • San Francisco, CA 94103 • (415) 922-0200 x 111 • yosef@tahbazoflaw.com

EDUCATION

University of California, Hastings College of the Law, San Francisco, CA
Juris Doctor, 2011

Santa Clara University, Santa Clara, CA
Bachelor of Science in Commerce, 2008

EXPERIENCE

Tahbazof Law Firm, San Francisco, CA August 2011 - Present
Partner

- Drafted contracts including real property purchase agreements, LLC operating agreements, stipulations, settlement agreements, prime contracts, subcontractor agreements, lease agreements, employment contracts.
- Negotiated informal settlements resulting in fair compromises and avoidance of cumbersome litigation.
- Represented clients in disputes and cases concerning mechanics' liens, construction defects, unlawful detainers, breach of contractual obligations.

SST Investments, San Francisco, CA August 2011 - Present
Manager

- Management of hundreds of rental units including mediation of conflicts with tenants and neighbors; implementation of innovative work order tracking system; ensuring prompt repairs; coordinating with independent contractors; acquiring and maintaining proper documentation; resolving tenant complaints; ensuring legal compliance of operations.
- Created project-specific construction accounting programs.
- Secured over \$10 million in financing for construction projects.
- Successfully led refinancing efforts for dozens of apartment buildings.
- Construction management including negotiating supply and service contracts; overseeing quality of work; utility applications; accounting for expenses.

Ross Madden Law, San Francisco, CA May 2010 – August 2010
Intern

- Drafted various forms of pleadings and motions.
- Data acquisition and forensic analysis used to uncover latent causes of action.
- Assisted in informal negotiations and discussions with opposing parties.

Price Waterhouse Coopers, San Francisco, CA May 2007 – September 2007
Transfer Pricing and Corporate Accounting Intern

- Implemented corporate guidelines and Generally Accepted Accounting Principles (GAAP) to prepare unified documents for the financial reporting of publicly traded corporations.
- Translated financial information into user-friendly formats for clientele.
- Researched Transfer Pricing Division guarantee agreements, capital infusion agreements and capital support agreements.
- Proactively participated in weekly staff meetings and coordinated large documents with and between associates for joint clients.

Effective Solutions, San Mateo, CA June 2006 – September 2006
Assistant Property Manager

- Responded to and satisfied tenant requests for property repairs.
- Mediated conflicts between landlords, tenants and neighbors.
- Managed and coordinated schedules of multiple contractors and merchants to maximize productivity.
- Assignments consisted of the removal and subsequent reinstallation of hardwood, sheetrock, and insulation as well as applying exterior and interior paint.

ACTIVITIES

Campaign Volunteer: San Francisco Supervisor Michela Alioto-Pier (2004) & San Francisco Mayor Gavin Newsom (2003)

Volunteer: Shelter Network, Home Away from Homelessness

Other: Setar (Persian classical instrument), Accounting Tutor, Law School Tutor

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Date Received
 Official Use Only

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
 Tahbazof Yosef Siavash

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 or Court Commissioner (Statewide Jurisdiction)
- County of San Francisco
- Other _____

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

- Annual: The period covered is January 1, 2012, through December 31, 2012.
- or-
 The period covered is _____ through December 31, 2012.
- Assuming Office: Date assumed _____
- Candidate: Election year _____ and office sought, if different than Part 1: _____
- Leaving Office: Date Left _____ (Check one)
- The period covered is January 1, 2012, through the date of leaving office.
- The period covered is _____ through the date of leaving office.

4. Schedule Summary

- Check applicable schedules or "None." ► Total number of pages including this cover page: 4
- 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

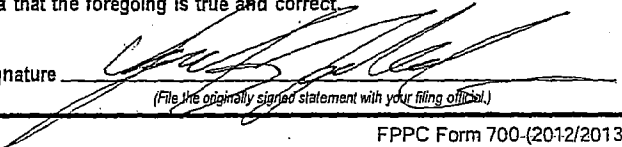
MAILING ADDRESS STREET CITY STATE ZIP CODE
 (Business or Agency Address Recommended - Public Document)
 1256 Howard Street San Francisco CA 94103

DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS (OPTIONAL)
 (415) 601-5529 yosef@tahbazoflaw.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 10/28/2013
 (month, day, year)

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

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
Yosef Tahbazof

1. BUSINESS ENTITY OR TRUST

SYTS Investments, LLC
Name
1256 Howard Street, San Francisco, CA 94103
Address (Business Address Acceptable)

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

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Real property rental

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$0 - \$1,999 / / 12 / / 12
 \$2,000 - \$10,000 ACQUIRED DISPOSED
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INVESTMENT
 Partnership Sole Proprietorship LLC Other

YOUR BUSINESS POSITION Member

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
Properties listed in Item 4.

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

Check one box:
 INVESTMENT REAL PROPERTY

See attachment.

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 / / 12 / / 12
 \$10,001 - \$100,000 ACQUIRED DISPOSED
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership
 Leasehold Yrs. remaining Other

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

1. BUSINESS ENTITY OR TRUST

Tahbazof Law Firm, LLP
Name
1256 Howard Street, San Francisco, CA 94103
Address (Business Address Acceptable)

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

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Legal services

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$0 - \$1,999 / / 12 / / 12
 \$2,000 - \$10,000 ACQUIRED DISPOSED
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INVESTMENT
 Partnership Sole Proprietorship LLP Other

YOUR BUSINESS POSITION Partner

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
Legal services rendered.

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 / / 12 / / 12
 \$10,001 - \$100,000 ACQUIRED DISPOSED
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership
 Leasehold Yrs. remaining Other

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

Comments:

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name
Yosef Tahbazof

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
537-541 Natoma

CITY
San Francisco

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000 01 / 11 / 12 / / 12
 \$10,001 - \$100,000 ACQUIRED DISPOSED
 \$100,001 - \$1,000,000
 Over \$1,000,000

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

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
1402 Sanchez

CITY
San Francisco

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000 03 / 08 / 12 / / 12
 \$10,001 - \$100,000 ACQUIRED DISPOSED
 \$100,001 - \$1,000,000
 Over \$1,000,000

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 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

ATTACHMENT TO SCHEDULE A-2

SYTS INVESTMENTS, LLC

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

- 1 595-599 Naples Avenue, San Francisco
Fair market value \$100,001-\$1,000,000
Nature of interest Property ownership

- 2 635 Burnett Avenue, San Francisco
Fair market value Over \$1,000,000
Nature of interest Property ownership

- 3 2500-2510 Folsom Street, San Francisco
Fair market value Over \$1,000,000
Nature of interest Property ownership

- 4 941 Cayuga Avenue, San Francisco
Fair market value \$100,001-\$1,000,000
Nature of interest Property ownership

- 5 915 Cayuga Avenue, San Francisco
Fair market value Over \$1,000,000
Nature of interest Property ownership

Assessment Appeals Board
 City and County of San Francisco
 (415) 554-6778 Fax (415) 554-6775



City Hall, Room 405
 1 Dr. Carlton B. Goodlett Place
 San Francisco, CA 94102-4697

Complete and return this original Application to the Assessment Appeals Board

Application for Appointment to: Board 1 or Board 1 Alternate
 (Please circle one) Board 2 or Board 2 Alternate
Board 3 or Board 3 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: Angela M. Cheung Home Address: Clay Street #102
 City: San Francisco State: CA Zip code: 94109
 Business Address: 1725 Clay Street #102 City: S.F. State: CA Zip Code: 94109
 Home Phone: _____ Work Phone: (415) 706-7688 Fax #: (415) 771-8082
 Pager #: _____ E-Mail Address: @hotmail.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: (1) certified public accountant or public accountant; (2) licensed real estate broker; (3) attorney; or (4) 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: Being a R.E. Professional since 1992 & obtained the broker license in 1996. Opened my own R.E. brokerage firm in 2002.

Please state your business and/or professional experience: Managing Broker/owner of Presidio Realty since 2002 and as full time R.E. Professional for 21 years. Please see attached Resume.

Occupation: Real Estate Broker Education: B.S. Degree in Finance

Civic Activities: Regular blood donor & city charity events supporter.

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

Other Personal Information (optional) _____

Would you be able to attend Day Meetings? Yes No Evening meetings? Yes No
 How many days a week would you be available for hearings? One How many evenings a week? One or Two
 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: Aug 16, 2013 Applicant's Signature: [Signature]

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

Angela M. Cheung
Broker
(DRE License # 01142918)
Presidio Realty
— Bay Street, Suite 102
San Francisco, CA 94109
Office: (415) 771-2300
Direct: (415) —
—)hotmail.com

HIGHLIGHTS OF QUALIFICATIONS

- Obtained Bachelor of Science in Finance, with special emphasis on Real Estate Investment; California State University, East Bay (Hayward), March 1993.
- Obtained Real Estate Salesperson License, August 1992.
- Obtained Certificate of Mortgage Banking, California State University, East Bay (Hayward), March 1994.
- Obtained Real Estate Broker License, July 1996.

PROFESSIONAL ATTRIBUTES AND RESOURCES

- Broker / Owner of Presidio Realty, San Francisco, from July 2003 to present.
- Exclusive Broker to market & sell the Millennium Tower condominiums in Beijing and Guangzhou, from January 2011 to present. Market & sell the Millennium Tower condominiums in Shanghai and Hong Kong, from January 2011 to present.
- Broker / Owner of Landmark Realty, Alameda, from October 2002 to June 2003.
- Broker Associate with Pacific Union Real Estate Group, Inc, Civic Center Office, San Francisco, CA from April 1999 to September 2002
- Loan and Broker Associate with Land & Property Investment-Hometrend, San Francisco, CA from June 1994 to April 1999
- Loan Associate with California Home Loans, Oakland, CA from August 1992 to June 1994

FURTHER COURSE WORK

- Real Estate Practice
- Real Estate Appraisal Evaluation
- Real Estate Marketing
- Legal Aspects of Real Estate
- Loan Underwriting
- Compliance Regulations in Mortgage Banking

GENERAL SKILLS

- Bilingual: Fluent in Chinese
- Complete Knowledge of current mortgage loan guidelines
- Strong quantitative and analytical skills

References provided upon request

**STATE OF CALIFORNIA
BUREAU OF REAL ESTATE**

The license information shown below represents public information taken from the Bureau 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 Bureau of Real Estate on 10/2/2013 8:22:45 PM

License Type: BROKER

Name: Cheung, Angela Man Ki

Mailing Address: CLAY STREET # 102
SAN FRANCISCO, CA 94109

License ID: 01142918

Expiration Date: 07/15/16

License Status: LICENSED

Salesperson License Issued: 08/07/92 (Unofficial -- taken from secondary records)

Broker License Issued: 07/16/96 (Unofficial -- taken from secondary records)

Former Name(s): Ng, Angela Man Ki

Main Office: CLAY STREET # 102
SAN FRANCISCO, CA 94109

DBA NO CURRENT DBAS

Branches: NO CURRENT BRANCHES

Affiliated Licensed Corporation(s): 01359085 - Officer Expiration Date: 04/19/15
Amster Incorporation

Comment: NO DISCIPLINARY ACTION
NO OTHER PUBLIC COMMENTS
>>>> Public information request complete <<<<

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Date Received
 Official Use Only

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
 CHEUNG ANGELA MAN

1. Office, Agency, or Court

Agency Name
 ASSESSMENT APPEALS BOARD, CITY AND COUNTY OF SAN FRANCISCO
 Division, Board, Department, District, if applicable Your Position
 ASSESSMENT APPEALS BOARD BOARD 1, 2 & 3 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 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, 2012, through December 31, 2012.
 -or-
 The period covered is _____, through December 31, 2012.
 Assuming Office: Date assumed _____
 Candidate: Election year 2013 and office sought, if different than Part 1: _____
 Leaving Office: Date Left _____ (Check one)
 The period covered is January 1, 2012, through the date of leaving office.
 The period covered is _____, through the date of leaving office.

4. Schedule Summary

Check applicable schedules or "None." **► Total number of pages including this cover page: 3**

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

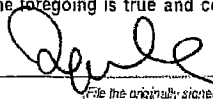
5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
 (Agency Address Recommended - Public Document)
CLAY STREET #102 SAN FRANCISCO CA 94109
 DAYTIME TELEPHONE (415) _____ E-MAIL ADDRESS (OPTIONAL) _____
 _____ @hotmail.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 10/27/2013
 (month, day, year)

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

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
ANGELA MAN CHEUNG

▶ 1. BUSINESS ENTITY OR TRUST

AMSTER INC. dba PRESIDIO REALTY

Name
1725 CLAY ST. #102, SAN FRANCISCO, CA 94109
 Address (Business Address Acceptable)

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

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
REAL ESTATE BROKERAGE FIRM

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:	
<input type="checkbox"/> \$0 - \$1,999	____/____/12	____/____/12
<input type="checkbox"/> \$2,000 - \$10,000	ACQUIRED	DISPOSED
<input checked="" type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

NATURE OF INVESTMENT CORPORATION
 Partnership Sole Proprietorship Other

YOUR BUSINESS POSITION MANAGING BROKER/OFFICER

▶ 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

COMMISSIONS GENERATED AS THE LISTING AGENT AND/OR SELLING AGENT OF A REAL ESTATE PROPERTY TRANSACTION.

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

Check one box:
 INVESTMENT REAL PROPERTY

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

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

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:	
<input type="checkbox"/> \$2,000 - \$10,000	____/____/12	____/____/12
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

NATURE OF INTEREST
 Property Ownership/Deced of Trust Stock Partnership

Leasehold _____ Other _____
 Yrs remaining

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

▶ 1. BUSINESS ENTITY OR TRUST

PILLAR CAPITAL

Name
1725 CLAY ST. #102, SAN FRANCISCO, CA 94109
 Address (Business Address Acceptable)

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

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
REAL ESTATE BROKERAGE FIRM

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:	
<input type="checkbox"/> \$0 - \$1,999	____/____/12	____/____/12
<input checked="" type="checkbox"/> \$2,000 - \$10,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

NATURE OF INVESTMENT CORPORATION
 Partnership Sole Proprietorship Other

YOUR BUSINESS POSITION MANAGING BROKER/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

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

Check one box:
 INVESTMENT REAL PROPERTY

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

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

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:	
<input type="checkbox"/> \$2,000 - \$10,000	____/____/12	____/____/12
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

NATURE OF INTEREST
 Property Ownership/Deced of Trust Stock Partnership

Leasehold _____ Other _____
 Yrs remaining

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

Comments: _____

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

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION
 Name
ANGELA MAN CHEUNG

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
AMSTER INC. dba PRESIDIO REALTY

ADDRESS (Business Address Acceptable)
1725 CLAY ST. #102, SAN FRANCISCO, CA 94109

BUSINESS ACTIVITY, IF ANY, OF SOURCE
REAL ESTATE SALES

YOUR BUSINESS POSITION
MANAGING 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 _____
(Real property, car, boat, etc.)
 Commission or Rental Income, list each source of \$10,000 or more

 Other _____
(Describe)

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

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

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

 Other _____
(Describe)

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

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

NAME OF LENDER

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

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

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

SECURITY FOR LOAN
 None Personal residence
 Real Property _____
Street address

City
 Guarantor _____
 Other _____
(Describe)

Comments: _____

FPPC Form 700 (2012/2013) Sch. C
 FPPC Advice Email: advice@fppc.ca.gov
 FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

Assessment Appeals Board
City and County of San Francisco
(415) 554-6778 Fax (415) 554-6775



City Hall, Room 405
1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102-4697

RECEIVED
AUG 16 2013

Complete and return this original Application to the Assessment Appeals Board

Application for Appointment to: Board 1 or Board 1 Alternate
(Please circle one) Board 2 or Board 2 Alternate
Board 3 or Board 3 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: JOHN M. LEE Home Address: _____

City: _____ State: _____ Zip code: _____

Business Address: 1 LETTERMAN DR. #C300 City: SAN FRANCISCO State: CA Zip Code: 94129

Home Phone: _____ Work Phone: 415 447-6231 Fax #: 415-447-6201

Pager #: 415 E-Mail Address: _____ @ Pacunion.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: (1) certified public accountant or public accountant; (2) licensed real estate broker; (3) attorney; or (4) 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 1988

Please state your business and/or professional experience: SALES OF REAL PROPERTY SINCE 1987.
MANAGE & SUPERVISE REAL ESTATE SALES TEAM

Occupation: REAL ESTATE BROKER Education: MBA FROM UCLA, BS ENGINEERING

Civic Activities: REAL ESTATE NEWSPAPER COLUMNIST FOR RICHMOND REVIEW UC. BERKELEY
AND SUNSET BEACH, PAST PRESIDENT AND BOARD MEMBER OF

Ethnicity (optional): ASIAN Sex (optional): M F VARIOUS ORGANIZATIONS

Other Personal Information (optional) _____

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

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

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: 8/15/2013

Applicant's Signature: [Signature]

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

Revised July 2013

COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
 Lee John M.

1. Office, Agency, or Court

Agency Name
 Assessment Appeals Board
 Division, Board, Department, District, if applicable
 Your Position
 Commissioner

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

Agency: _____ Position: _____

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

State 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, 2012, through December 31, 2012. Leaving Office: Date Left ____/____/____
 (Check one)
 -OR-
 The period covered is ____/____/____, through
 December 31, 2012. The period covered is January 1, 2012, through the date of leaving office.
 Assuming Office: Date assumed 09 / 01 / 2013 The period covered is ____/____/____, through the date of leaving office.

Candidate: Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None." ► Total number of pages including this cover page: 9

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

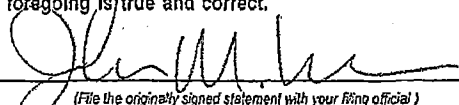
MAILING ADDRESS STREET CITY STATE ZIP CODE
 (Business or Agency Address Recommended - Public Document)
 1 Letterman Drive, #C500 San Francisco CA 94129

DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS (OPTIONAL)
 (415) 447-6231 dpacunion.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 09/15/2013
 (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.



Name
John M. Lee

▶ NAME OF BUSINESS ENTITY
Time Warner Cable

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Cable

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:
 _____ / _____ / 12 _____ / _____ / 12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Bank of America

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
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:
 _____ / _____ / 12 _____ / _____ / 12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Intel Corporation

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Computers

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

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

IF APPLICABLE, LIST DATE:
 _____ / _____ / 12 _____ / _____ / 12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
IBM

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Computers

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

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

IF APPLICABLE, LIST DATE:
 _____ / _____ / 12 _____ / _____ / 12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Merck

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Pharmaceutical

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:
 _____ / _____ / 12 _____ / _____ / 12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Microsoft

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Computer

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:
 _____ / _____ / 12 _____ / _____ / 12
 ACQUIRED DISPOSED

Comments: _____

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
 John M. Lee

▶ NAME OF BUSINESS ENTITY
Oracle Corporation

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Software

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:
 _____ / _____ / 12 _____ / _____ / 12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Qualcomm

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Computer

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:
 _____ / _____ / 12 _____ / _____ / 12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
LSI Corporation

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Computers

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

NATURE OF INVESTMENT
 Stock Other _____
(Describe)

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

IF APPLICABLE, LIST DATE:
 _____ / _____ / 12 _____ / _____ / 12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Times Warner

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Entertainment

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:
 _____ / _____ / 12 12 / 20 / 12
 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:
 _____ / _____ / 12 _____ / _____ / 12
 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:
 _____ / _____ / 12 _____ / _____ / 12
 ACQUIRED DISPOSED

Comments: Times Warner Stock was acquired 9/13/2000.

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 John M. Lee
--

1. BUSINESS ENTITY OR TRUST

John M Lee and Lily T Lee Revocable Trust
 Name

1 Letterman Drive, #C500, San Francisco, CA 94129
 Address (Business Address Acceptable)

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

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

<input type="checkbox"/> \$0 - \$1,999	_____ / _____ / 12	_____ / _____ / 12
<input type="checkbox"/> \$2,000 - \$10,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

NATURE OF INVESTMENT
 Partnership Sole Proprietorship _____ Other

YOUR BUSINESS POSITION _____

1. BUSINESS ENTITY OR TRUST

John M Lee and Lily T Lee Revocable Trust
 Name

1 Letterman Drive, #C500, San Francisco, CA 94129
 Address (Business Address Acceptable)

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

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

<input type="checkbox"/> \$0 - \$1,999	_____ / _____ / 12	_____ / _____ / 12
<input type="checkbox"/> \$2,000 - \$10,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

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)

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

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

<input type="checkbox"/> \$0 - \$499	<input checked="" 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)

None

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

None

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

Check one box:
 INVESTMENT REAL PROPERTY

3609-045

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

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

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

<input type="checkbox"/> \$2,000 - \$10,000	_____ / _____ / 12	_____ / _____ / 12
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED	DISPOSED
<input checked="" type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Yrs. remaining Other _____

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

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

Check one box:
 INVESTMENT REAL PROPERTY

1649-012

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

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

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

<input type="checkbox"/> \$2,000 - \$10,000	_____ / _____ / 12	_____ / _____ / 12
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED	DISPOSED
<input checked="" type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Yrs. remaining Other _____

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

Comments: _____

FPPC Form 700 (2012/2013) Sch. A-2
 FPPC Advice Email: advice@fppc.ca.gov
 FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

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 John M. Lee

1. BUSINESS ENTITY OR TRUST	
John M Lee and Lily T Lee Revocable Trust	
Name	
1 Letterman Drive, #C500, San Francisco, CA 94129	
Address (Business Address Acceptable)	
Check one	
<input checked="" type="checkbox"/> Trust, go to 2	<input type="checkbox"/> Business Entity, complete the box, then go to 2.
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	
FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$0 - \$1,999	____/____/12
<input type="checkbox"/> \$2,000 - \$10,000	ACQUIRED
<input type="checkbox"/> \$10,001 - \$100,000	DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	
NATURE OF INVESTMENT	
<input type="checkbox"/> Partnership	<input type="checkbox"/> Sole Proprietorship
	<input type="checkbox"/> Other
YOUR BUSINESS POSITION	

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	
<input type="checkbox"/> \$0 - \$499	<input checked="" 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)	
<input type="checkbox"/> None	
Alyson Belcher, Mary Jane Eisenberg, Sarah Haselup, Sarah Davis, Esmeralda Munoz	

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	
Check one box:	
<input type="checkbox"/> INVESTMENT	<input checked="" type="checkbox"/> REAL PROPERTY
1526-021	
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	
Rental Real Estate	
Description of Business Activity or City or Other Precise Location of Real Property	
FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	____/____/12
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED
<input type="checkbox"/> \$100,001 - \$1,000,000	DISPOSED
<input checked="" type="checkbox"/> Over \$1,000,000	
NATURE OF INTEREST	
<input checked="" type="checkbox"/> Property Ownership/Deed of Trust	<input type="checkbox"/> Stock
	<input type="checkbox"/> Partnership
<input type="checkbox"/> Leasehold	<input type="checkbox"/> Other
	Yrs. remaining
<input type="checkbox"/> Check box if additional schedules reporting investments or real property are attached	

1. BUSINESS ENTITY OR TRUST	
John M Lee and Lily T Lee Revocable Trust	
Name	
1 Letterman Drive, #C500, San Francisco, CA 94129	
Address (Business Address Acceptable)	
Check one	
<input checked="" type="checkbox"/> Trust, go to 2	<input type="checkbox"/> Business Entity, complete the box, then go to 2.
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	
FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$0 - \$1,999	____/____/12
<input type="checkbox"/> \$2,000 - \$10,000	ACQUIRED
<input type="checkbox"/> \$10,001 - \$100,000	DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	
NATURE OF INVESTMENT	
<input type="checkbox"/> Partnership	<input type="checkbox"/> Sole Proprietorship
	<input type="checkbox"/> Other
YOUR BUSINESS POSITION	

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	
<input type="checkbox"/> \$0 - \$499	<input checked="" 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)	
<input checked="" type="checkbox"/> None	

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	
Check one box:	
<input type="checkbox"/> INVESTMENT	<input checked="" type="checkbox"/> REAL PROPERTY
6167-027	
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	
Rental Real Estate	
Description of Business Activity or City or Other Precise Location of Real Property	
FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	____/____/12
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED
<input checked="" type="checkbox"/> \$100,001 - \$1,000,000	DISPOSED
<input type="checkbox"/> Over \$1,000,000	
NATURE OF INTEREST	
<input checked="" type="checkbox"/> Property Ownership/Deed of Trust	<input type="checkbox"/> Stock
	<input type="checkbox"/> Partnership
<input type="checkbox"/> Leasehold	<input type="checkbox"/> Other
	Yrs. remaining
<input type="checkbox"/> Check box if additional schedules reporting investments or real property are attached	

Comments: _____

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

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name <u>John M. Lee</u>

1. BUSINESS ENTITY OR TRUST

John M Lee and Lily T Lee Revocable Trust
Name

1 Letterman Drive, #C500, San Francisco, CA 94129
Address (Business Address Acceptable)

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

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

<input type="checkbox"/> \$0 - \$1,999	____/____/12	____/____/12
<input type="checkbox"/> \$2,000 - \$10,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

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)

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

None

Alice Sun, Alvin Chen, Tobi Stuart, John DeFazio, Brett Pameles, Peter Lowell, Matthew Schlachtman

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

Check one box:
 INVESTMENT REAL PROPERTY

0218-11

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

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

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

<input type="checkbox"/> \$2,000 - \$10,000	____/____/12	____/____/12
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input checked="" type="checkbox"/> Over \$1,000,000		

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Yrs. remaining Other _____

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

1. BUSINESS ENTITY OR TRUST

Name _____

Address (Business Address Acceptable) _____

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

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

<input type="checkbox"/> \$0 - \$1,999	____/____/12	____/____/12
<input type="checkbox"/> \$2,000 - \$10,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

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)

<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)

None

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

Check one box:
 INVESTMENT REAL PROPERTY

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

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

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

<input type="checkbox"/> \$2,000 - \$10,000	____/____/12	____/____/12
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Yrs. remaining Other _____

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

Comments: _____

SCHEDULE B
Interests in Real Property
 (Including Rental Income)

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
 1412-019

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

 / / 12 / / 12
 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

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
 2041-012

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

 / / 12 / / 12
 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 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: _____

FPPC Form 700 (2012/2013) Sch. B
 FPPC Advice Email: advice@fppc.ca.gov
 FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

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

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name John M. Lee
--

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
 Pacific Union International

ADDRESS (Business Address Acceptable)
 1 Letterman Dr, #C500, San Francisco, CA 94129

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Real Estate

YOUR BUSINESS POSITION
 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 _____
(Real property, car, boat, etc.)
 Commission or Rental Income, list each source of \$10,000 or more

 Other _____
(Describe)

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
 Dignity Health

ADDRESS (Business Address Acceptable)
 900 Hyde St, San Francisco, CA 94109

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Hospital

YOUR BUSINESS POSITION
 Pharmacist

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

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

 Other _____
(Describe)

2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

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

NAME OF LENDER* _____

ADDRESS (Business Address Acceptable) _____

BUSINESS ACTIVITY, IF ANY, OF LENDER _____

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

INTEREST RATE _____% None

TERM (Months/Years) _____

SECURITY FOR LOAN
 None Personal residence
 Real Property _____
Street address

City
 Guarantor _____
 Other _____
(Describe)

Comments: _____

SCHEDULE E
Income - Gifts
Travel Payments, Advances,
and Reimbursements

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name John M. Lee
--

- You must 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. These payments are not subject to the \$440 gift limit, but may result in a disqualifying conflict of interest.

▶ NAME OF SOURCE (Not an Acronym)
 San Francisco Association of REALTORS (SFAR)

ADDRESS (Business Address Acceptable)
 301 Grove Street

CITY AND STATE
 San Francisco, CA 94102

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
 Real Estate Association

DATE(S): 09 / 01 / 12 - 08 / 31 / 13 AMT: \$ 5,233.03
(if gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description
Reimbursement for travel expenses to various
conferences on behalf of SFAR

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)

DATE(S): ____ / ____ / ____ - ____ / ____ / ____ AMT: \$ ____
(if gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)

DATE(S): ____ / ____ / ____ - ____ / ____ / ____ AMT: \$ ____
(if gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)

DATE(S): ____ / ____ / ____ - ____ / ____ / ____ AMT: \$ ____
(if gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description

Comments: _____

**STATE OF CALIFORNIA
BUREAU OF REAL ESTATE**

The license information shown below represents public information taken from the Bureau 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 Bureau of Real Estate on 8/14/2013 9:46:55 AM

License Type: BROKER

Name: Lee, John M

Mailing Address: — LAPLAYA STE 537
SAN FRANCISCO, CA 94121

License ID: 00965312

Expiration Date: 09/28/16

License Status: LICENSED

Salesperson License Issued: 07/20/87 (Unofficial -- taken from secondary records)

Broker License Issued: 09/29/88 (Unofficial -- taken from secondary records)

Former Name(s): NO FORMER NAMES

Main Office: 1 LETTERMAN DRIVE
BUILDING C SUITE 300
SAN FRANCISCO, CA 94129

DBA NO CURRENT DBAS

Branches: NO CURRENT BRANCHES

Affiliated Licensed Corporation(s): NO CURRENT AFFILIATED CORPORATIONS

Salespersons: 01008573 - Lee, Lily Tam

Comment: NO DISCIPLINARY ACTION
NO OTHER PUBLIC COMMENTS

>>>> Public Information request complete <<<<

Wong, Linda (BOS)

From: Lee, John [johnlee@pacunion.com]
Sent: Sunday, October 27, 2013 5:44 PM
To: Wong, Linda (BOS)
Cc: Duran, Dawn
Subject: RE: Board of Supervisors' Rules Committee Meeting - Assessment Appeals Board Nos. 1-3
Attachments: AAB Letter.102713.pdf

Hi Linda,

Thank you for the email. Unfortunately I will be out of town this week and won't be able to attend the Rules Committee meeting on Thursday.

Please submit the attached letter on my behalf and I will reach out to Supervisors Yee, Breed, and Cohen prior to the meeting.

Thanks!

John M. Lee, MBA | Real Estate Broker
PACIFIC UNION INTERNATIONAL - CHRISTIE'S GREAT ESTATES
One Letterman Drive, Bldg C, Suite 300, San Francisco, CA 94129
d. 415.447.6231 | f. 415.447.6201 | johnlee@pacunion.com | BRE# 00965312
A Member Of Real Living

From: Wong, Linda (BOS) [mailto:linda.wong@sfgov.org]
Sent: Friday, October 25, 2013 4:05 PM
To: ytahbazof@gmail.com; merv.conlan@sbcglobal.net; fredperezcpa@yahoo.com; meguxton@comcast.net; sridgell@aol.com; kristy@mleffers.com; Lee, John; angelamcheung@hotmail.com; rchang@manatt.com; evalla@lurie.com; jjmassociates@sbcglobal.net
Cc: Duran, Dawn
Subject: Board of Supervisors' Rules Committee Meeting - Assessment Appeals Board Nos. 1-3

Please be advised that the next Rules Committee meeting is scheduled for Thursday, October 31, 2013, at 1:30 p.m. in City Hall, Room 263.

The Committee Members will meet to consider your appointment to the Assessment Appeals Board Nos. 1-3.

There are no set instructions on what you are expected to tell the Rules Committee. However, a brief description of your qualifications, reasons for interest in the subject, or a short discussion of why you feel you would make a good candidate is appropriate.

Please respond before Tuesday, October 29, 2013, whether or not you will be able to attend this meeting.

Sincerely,

Linda Wong
Board of Supervisors

City Hall

1 Dr. Carlton B. Goodlett Place, Room 244

San Francisco, CA 94102

Telephone No. 415-554-7719 Fax No. 415-554-7714

Complete a Board of Supervisors Customer Satisfaction form by clicking:<http://www.sfbos.org/index.aspx?page=104>.



October 27, 2013

Supervisor Norman Yee
Supervisor London Breed
Supervisor Malia Cohen
SF Board of Supervisors - Rules Committee

RE: Assessment Appeals Board Appointment

Dear Supervisors Yee, Breed, and Cohen:

I was notified on Friday, October 25th, that my appointment to the Assessment Appeals Board (AAB) has been calendared for October 31, 2013. Unfortunately I will be out of town this week and unable to reschedule my trip. I am hoping the following regarding my qualifications will suffice in lieu of an appearance before the Rules Committee.

I have been a real estate broker for the past 25 years helping our San Francisco residents buy and sell properties. I mainly work with sellers and my principal function is helping them with pricing; thus I believe that my experience will help tremendously with the Assessment Appeals Board position. In addition to my work experience, I have been serving our community by writing monthly real estate articles published in the Richmond ReView and Sunset Beacon; leading different real estate related organizations; and participating in various community events throughout the City. I have spoken to several current AAB commissioners and understand what this position requires. In fact, all of them are supportive of my application to the AAB.

My hope is that you will support my appointment to the AAB and vote to recommend me to the full Board. If you have any questions, please do not hesitate to contact me.

Sincerely,

John M. Lee
Broker
(415) 465-0505
johnlee@pacunion.com

1 [Administrative Code - Assessment Appeals Boards - Modify Board No. 3 Membership and
2 Function; Procedural Revisions]

3 **Ordinance amending the Administrative Code, regarding Assessment Appeals Boards,**
4 **to modify the structure of Assessment Appeals Board No. 3 to provide that the**
5 **members of Board No. 3 are different than the members of Board No. 1; that the**
6 **function of Board No. 3 is the same as Board No. 2; provide for staggered terms of**
7 **initial Board No. 3 members; remove provisions regarding Board members not meeting**
8 **current State requirements; add a public comment timing option; and making**
9 **nonsubstantive clarifying revisions.**

10
11 **NOTE:** Additions are single-underline italics Times New Roman font;
12 deletions are strike-through italics Times New Roman font.
13 Board amendment additions are double-underlined Arial font;
14 Board amendment deletions are strikethrough Arial font.

15 Be it ordained by the People of the City and County of San Francisco:

16
17 Section 1. The Administrative Code is hereby amended by amending Sections 2B.3,
18 2B.6, 2B.13, 2B.14, and 2B.20, to read as follows:

19
20 **SEC. 2B.3. BOARD MEMBERSHIP AND SELECTION.**

21 (a) Assessment Appeals Board No. 1, ~~and~~ Assessment Appeals Board No. 2, and
22 Assessment Appeals Board No. 3, shall each consist of five regular members and three alternate
23 members who shall be selected in the manner described in Subsections (b), (c) and (d). ~~In~~
24 ~~addition, the regular members of Assessment Appeals Board No. 2 shall also serve as and, except as~~
25 ~~provided in Section 2B.14(b), shall be entitled to the priorities extended to alternate members of~~

1 ~~Assessment Appeals Board No. 1. Assessment Appeals Board No. 3 shall consist of five regular~~
2 ~~members. The regular members of Assessment Appeals Board No. 1 shall serve ex officio as the regular~~
3 ~~members of Assessment Appeals Board No. 3 concurrent with their service on Assessment Appeals~~
4 ~~Board No. 1.~~

5 (b) Pursuant to Sections 1622.1 and 1623.1 of the California Revenue and Taxation
6 Code, the Board of Supervisors hereby elects to appoint directly the regular and alternate
7 members of the Assessment Appeals Boards.

8 (c) No person shall be eligible for appointment as a regular or alternate member of
9 Assessment Appeals Board No. 1, ~~or Assessment Appeals Board No. 2, or Assessment Appeals~~
10 ~~Board No. 3,~~ unless he or she meets the eligibility criteria set forth in Section 1624.05 of the
11 California Revenue and Taxation Code. ~~This Subsection (c) shall not apply to any individual who~~
12 ~~was a regular or alternate member of the Assessment Appeals Boards on or before September 1, 1998~~
13 ~~and who is reappointed to his or her same seat.~~

14 (d) No person may concurrently hold a seat on ~~Assessment Appeals Board No. 1 and a~~
15 ~~seat on Assessment Appeals Board No. 2.~~ more than one of the three Assessment Appeals Boards
16 (Assessment Appeals Board No. 1, Assessment Appeals Board No. 2, Assessment Appeals Board No. 3).

17 (e) Subject to Sections 1623(d) and (e) of the California Revenue and Taxation Code,
18 the terms of regular and alternate members of the Assessment Appeals Boards shall be three
19 years, expiring at 12:01 a.m. on the first Monday in September of the third year.

20
21
22 **SEC. 2B.6. BOARD COMPOSITION AND BOARD QUORUM.**

23 (a) The Assessment Appeals Board shall hold joint meetings from time to time for the
24 purpose of proposing rules and regulations to the Board of Supervisors to govern the
25 operation of the Assessment Appeals Boards. Such joint meetings shall be held before the

1 five regular members of Assessment Appeals Board No. 1, ~~and~~ the five regular members of
2 Assessment Appeals Board No. 2, and the five regular members of Assessment Appeals Board
3 No. 3. The attendance by three regular members of Assessment Appeals Board No. 1, ~~and~~
4 three regular members of Assessment Appeals Board No. 2, and three regular members of
5 Assessment Appeals Board No. 3 shall constitute a quorum for such meetings.

6 (b) Except as provided in Subsection (a), each Assessment Appeals Board shall act
7 separately and only as three-member panels designated by the Clerk in the manner described
8 in Subsection (d). The attendance by two members of any designated Assessment Appeals
9 Board three-member panel shall constitute a quorum for the transaction of business.

10 (c) Except as provided by Title 18 California Code of Regulations Rule 310, no act of
11 the joint Boards or a three-member panel of a Board shall be valid or binding unless approved
12 by a majority of all the members of the applicable body.

13 (d) Subject to California Revenue and Taxation Code Section 1622.5 and Title 18 ~~of~~
14 ~~the~~ California Code of Regulations Rule 311, the Clerk shall designate three-member panels
15 to transact the business of the Assessment Appeals Boards, as set forth in Subsection (b),
16 using a rotating system designed to assure that all members with the same priority level, as
17 described in this ~~subsection~~ Subsection 2B.6(d), have an equal opportunity over time to
18 participate as panelists.

19 ~~(1) This Subsection (d)(1) shall govern the panel selection for any application for~~
20 ~~reduction that concerns:~~

21 ~~(A) Real property located all or in a part within Assessor's Blocks 1 through 876,~~
22 ~~inclusive, or Assessor's Blocks 3701 through 3899, inclusive, except not including residential real~~
23 ~~property on the secured roll consisting of four units or less that is located all or in a part within those~~
24 ~~Blocks;~~

25 ~~(B) A possessory interest; or~~

1 ~~(C) Property on the secured or unsecured roll assessed at \$50,000,000.00 or more.~~

2 ~~The Clerk shall assign any application covered by Sections 2B.6(d)(1)(A) through (C) to~~
3 ~~either Assessment Appeals Board No. 1 or Assessment Appeals Board No. 3. For cases governed by~~
4 ~~this Subsection (d)(1) that are assigned to Assessment Appeals Board No. 1, the Clerk shall designate~~
5 ~~three panelists from among the members in the following priority order: (a) the regular members of~~
6 ~~Assessment Appeals Board No. 1 who meet the eligibility criteria set forth in Section 1624.05 of the~~
7 ~~California Revenue and Taxation Code; (b) the regular members of Assessment Appeals Board No. 1~~
8 ~~who do not meet the eligibility criteria set forth in Section 1624.05 of the California Revenue and~~
9 ~~Taxation Code; (c) the alternate members of Assessment Appeals Board No. 1 (including the regular~~
10 ~~members of Assessment Appeals Board No. 2) who meet the eligibility criteria set forth in Section~~
11 ~~1624.05 of the California Revenue and Taxation Code; (d) the alternate members of Board No. 1~~
12 ~~(including the regular members of Assessment Appeals Board No. 2) who do not meet the eligibility~~
13 ~~criteria set forth in Section 1624.05 of the California Revenue and Taxation Code; and (e) the alternate~~
14 ~~members of Assessment Appeals Board No. 2 who meet the eligibility criteria in Section 1624.05 of the~~
15 ~~California Revenue and Taxation Code. For cases governed by this Subsection (d)(1) that are assigned~~
16 ~~to Assessment Appeals Board No. 3, the Clerk shall assign three panelists from among the members in~~
17 ~~the following priority order: (a) the regular members of Assessment Appeals Board No. 3 who meet the~~
18 ~~eligibility criteria set forth in Section 1624.05 of the California Revenue and Taxation Code; (b) the~~
19 ~~regular members of Assessment Appeals Board No. 3 who do not meet the eligibility criteria set forth in~~
20 ~~Section 1624.05 of the California Revenue and Taxation Code; (c) the alternate members of Assessment~~
21 ~~Appeals Board No. 1 (including the regular members of Assessment Appeals Board No. 2) who meet~~
22 ~~the eligibility criteria set forth in Section 1624.05 of the California Revenue and Taxation Code; (d) the~~
23 ~~alternate members of Board No. 1 (including the regular members of Assessment Appeals Board No. 2)~~
24 ~~who do not meet the eligibility criteria set forth in Section 1624.05 of the California Revenue and~~

1 ~~Taxation Code; and (e) the alternate members of Assessment Appeals Board No. 2 who meet the~~
2 ~~eligibility criteria set forth in Section 1624.05 of the California Revenue and Taxation Code.~~

3 (2-1) For any application for reduction or other matter to be heard by Assessment
4 Appeals Board No. 1 ~~that is not governed by Subsection (d)(1)~~, the Clerk shall designate three
5 panelists from among the members in the following priority order: ~~(aA) the regular members of~~
6 ~~Assessment Appeals Board No. 1; (bB) the alternate members of Assessment Appeals Board~~
7 ~~No. 1; (including the regular members of Assessment Appeals Board No. 2); and (cC) the alternate~~
8 ~~members of Assessment Appeals Board No. 2; (D) the regular members of Assessment Appeals~~
9 ~~Board No. 2; (E) the alternate members of Assessment Appeals Board No. 3; and (F) the regular~~
10 ~~members of Assessment Appeals Board No. 3.~~

11 (3) ~~For any matter to be heard by Assessment Appeals Board No. 3 that is not governed~~
12 ~~by Subsection (d)(1), the Clerk shall designate three panelists from among the members in the~~
13 ~~following priority order: (a) the regular members of Assessment Appeals Board No. 3; (b) the alternate~~
14 ~~members of Assessment Appeals Board No. 1 (including the regular members of Assessment Appeals~~
15 ~~Board No. 2); and (c) the alternate members of Assessment Appeals Board No. 2.~~

16 (4-2) For any application for reduction to be heard by Assessment Appeals
17 Board No. 2, the Clerk shall designate three panelists from among the members in the
18 following priority order: ~~(aA) the regular members of Assessment Appeals Board No. 2;~~
19 ~~(bB) the alternate members of Assessment Appeals Board No. 2; (cC) the alternate members~~
20 ~~of Assessment Appeals Board No. 1-3; and (dD) the regular members of Assessment Appeals~~
21 ~~Board No. 1-3; (E) the alternate members of Assessment Appeals Board No. 1; and (F) the regular~~
22 ~~members of Assessment Appeals Board No. 1.~~

23 (3) For any application for reduction to be heard by Assessment Appeals Board No. 3,
24 the Clerk shall designate three panelists from among the members in the following priority order:
25 (A) the regular members of Assessment Appeals Board No. 3; (B) the alternate members of Assessment

1 Appeals Board No. 3; (C) the alternate members of Assessment Appeals Board No. 2; (D) the regular
2 members of Assessment Appeals Board No. 2; (E) the alternate members of Assessment Appeals Board
3 No. 1; and (F) the regular members of Assessment Appeals Board No. 1.
4
5

6 **SEC. 2B.13. DUTIES AND OPERATIONS.**

7 (a) Assessment Appeals Board No. 1 ~~and Assessment Appeals Board No. 3~~ shall have
8 jurisdiction to hear applications for reduction affecting any property on the secured or
9 unsecured rolls without limitation.

10 (b) In addition to the general jurisdiction of Board No. 1 as specified in Subsection (a), the
11 Clerk shall exclusively assign to Assessment Appeals Board No. 1 any application for reduction that
12 involves:

13 (1) Real property located all or in a part within Assessor's Blocks 1 through 876,
14 inclusive, or Assessor's Blocks 3701 through 3899, inclusive, except not including residential real
15 property on the secured roll consisting of four units or less that is located all or in a part within those
16 Blocks;

17 (2) A possessory interest; or

18 (3) Property on the secured or unsecured roll assessed at \$50,000,000.00 or more.

19 (b-c) Assessment Appeals Board No. 2 ~~and Assessment Appeals Board No. 3~~ shall have
20 jurisdiction to hear applications for reduction only for property on the secured or unsecured
21 rolls assessed at less than \$50,000,000.00, excluding applications involving possessory
22 interests or real property located all or in part within Assessor's Blocks 1 through 876,
23 inclusive, or Assessor's Blocks 3701 through 3899, inclusive. Except that, Assessment
24 Appeals Board No. 2 shall have jurisdiction to hear applications for reduction for residential
25 real property consisting of four units or less that is assessed at less than \$50,000,000.00 and

1 located all or in part within Assessor's Blocks 1 through 876, inclusive, or Assessor's Blocks
2 3701 through 3899, inclusive.
3
4

5 **SEC. 2B.14. HEARING OFFICERS.**

6 (a) Pursuant to California Revenue and Taxation Code Division 1, Part 3, Chapter 1, Article
7 1.7 (commencing with Section 1636) ~~of Chapter 1, Part 3, Division 1 of the California Revenue and~~
8 ~~Taxation Code~~, all regular and alternate members appointed to Assessment Appeals Board
9 No. 1, ~~and~~ Assessment Appeals Board No. 2, ~~and Assessment Appeals Board No. 3~~, are deemed
10 concurrently appointed as assessment hearing officers. As provided by law and regulation,
11 assessment hearing officers may conduct hearings on applications for reduction filed with the
12 Assessment Appeals Boards and make recommendations to an Assessment Appeals Board
13 concerning such applications.

14 (b) The Clerk shall designate members to act as hearing officers for particular
15 applications using a rotating system designed to assure that all members with the same
16 priority level, as described in this ~~subsection~~ Subsection 2B.14(b), have an equal opportunity over
17 time to participate as hearing officers. The Clerk shall designate hearing officers in the
18 following priority order: (1) the regular members of Assessment Appeals Board No. 3; (2) the
19 alternate members of Assessment Appeals Board No. 3; (3) the alternate members of Assessment
20 Appeals Board No. 2; (24) the alternate members of Assessment Appeals Board No. 1 ~~who are~~
21 ~~not also regular members of Assessment Appeals Board No. 2~~; (35) the regular members of
22 Assessment Appeals Board No. 2; and (46) the regular members of Assessment Appeals
23 Board No. 1.

24 (c) In their capacity as assessment hearing officers, the officers shall serve at the
25 pleasure of and by contract with the Board of Supervisors. For their work performed as

1 assessment hearing officers, the officers shall be compensated at the same rate provided in
2 Section 2B.5 of this Chapter for Assessment Appeals Board members.

3
4
5 **SEC. 2B.20. HEARING PROCEDURES.**

6 Each ~~a~~Assessment Appeals Board created pursuant to this Chapter shall:

7 (a) In addition to complying with notice and procedural requirements of the Revenue
8 and Taxation Code and the California Code of Regulations, provide notice of all meetings,
9 including deliberations, and post agendas as if Assessment Appeals Boards were subject to
10 the Brown Act and the Sunshine Ordinance. The agendas shall list each application including
11 the address of the property, the purpose of the hearing, the current assessment, and
12 applicant's opinion of value.

13 (b) Allow public comment on each assessment appeal to be heard by an Assessment
14 Appeals Board. Public comment shall be received either when an Assessment Appeals Board
15 convenes to hear one or more assessment appeals, or at the time ~~an~~each appeal is called for
16 hearing. The agenda for each meeting of an Assessment Appeals Board shall bear the
17 following notice:

18 Under the California Constitution and applicable statutes, hearings of
19 assessment appeals boards are judicial proceedings. The decisions of
20 assessment appeals boards must be based exclusively on properly admitted
21 evidence. Assessment appeals boards may not base any factual
22 determinations necessary for their decisions on anything other than the
23 aforementioned evidence. Information presented through public comment
24 unless properly admitted into evidence in compliance with the Revenue and
25 Taxation Code and of the Property Tax Rules of the State ~~b~~Board of

1 Equalization is not evidence upon which assessment appeals boards may
2 base findings.

3 (c) Conduct all hearings, deliberations, and other business including closed sessions
4 as authorized by law, at duly noticed meetings, with notice afforded to all members of the
5 Board; and ~~Take~~ decisions only through the actions of members present at such meetings.
6

7
8 Section 2. This section is uncoded.

9 Terms of Initial Appointees to Board No. 3.

10 Following adoption of this Ordinance, consistent with California Revenue and Taxation Code
11 section 1622.1(b), the terms of the initially appointed five regular Members and three Alternate
12 Members to Board No. 3 shall be staggered, as follows:

13 (a) The Member first selected shall serve for a term of three years beginning on the first
14 Monday in September 2013; the second member selected shall serve for a term of two years beginning
15 on such date; the third member selected shall serve for a term of one year beginning on such date; the
16 fourth member shall serve for a term of three years beginning on such date; and the fifth member shall
17 serve for a term of two years beginning on such date.

18 (b) The Alternate Member first selected shall serve for a term of three years beginning on the
19 first Monday in September 2013; the second member selected shall serve for a term of two years
20 beginning on such date; and the third member selected shall serve for a term of one year beginning on
21 such date.

22
23 //

24 //

25 //

1 Section 3. This section is uncodified.

2 Effective Date. This ordinance shall become effective 30 days from the date of
3 passage.

4
5
6 Section 4. This section is uncodified.

7 In enacting this Ordinance, the Board intends to amend only those words, phrases,
8 paragraphs, subsections, sections, articles, numbers, punctuation, charts, diagrams, or any
9 other constituent part of the Administrative Code that are explicitly shown in this Ordinance as
10 additions, deletions, Board amendment additions, and Board amendment deletions in
11 accordance with the "Note" that appears under the official title of the Ordinance.

12
13
14
15 APPROVED AS TO FORM:
16 DENNIS J. HERRERA, City Attorney

17 By: 
18 Marie Corlett Blits
19 Deputy City Attorney

20 n:\legana\as2013\1300461\00848869.doc
21
22
23
24
25



City and County of San Francisco

Tails
Ordinance

City Hall
1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102-4689

File Number: 130501

Date Passed: June 25, 2013

Ordinance amending the Administrative Code, regarding Assessment Appeals Boards, to modify the structure of Assessment Appeals Board No. 3 to provide that the members of Board No. 3 are different than the members of Board No. 1; that the function of Board No. 3 is the same as Board No. 2; provide for staggered terms of initial Board No. 3 members; remove provisions regarding Board Members not meeting current State requirements; add a public comment timing option; and making nonsubstantive clarifying revisions.

June 06, 2013 Rules Committee - RECOMMENDED

June 18, 2013 Board of Supervisors - PASSED, ON FIRST READING

Ayes: 11 - Avalos, Breed, Campos, Chiu, Cohen, Farrell, Kim, Mar, Tang, Wiener and Yee

June 25, 2013 Board of Supervisors - FINALLY PASSED

Ayes: 11 - Avalos, Breed, Campos, Chiu, Cohen, Farrell, Kim, Mar, Tang, Wiener and Yee

File No. 130501

I hereby certify that the foregoing Ordinance was FINALLY PASSED on 6/25/2013 by the Board of Supervisors of the City and County of San Francisco.

Angela Calvillo
Clerk of the Board

Mayor

7/3/13

Date Approved

