

OFFICE OF THE MAYOR
SAN FRANCISCO



LONDON N. BREED
MAYOR

Notice of Reappointment

July 1, 2019

San Francisco Board of Supervisors
City Hall, Room 244
1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102

Honorable Board of Supervisors:

Pursuant to Charter Section 4.117, of the Charter of the City and County of San Francisco, I make the following reappointment:

Ben Bleiman to the Entertainment Commission for a four year term ending July 1, 2023.

I am confident that Mr. Bleiman will serve our community well. Attached are his qualifications to serve, which demonstrate how his appointment represents the communities of interest, neighborhoods and diverse populations of the City and County of San Francisco.

Should you have any question about this appointment, please contact my Director of Commission Affairs, Kanishka Karunaratne Cheng, at 415.554.6696

Sincerely,

A handwritten signature in blue ink that reads "London Breed".

London N. Breed
Mayor, City and County of San Francisco

RECEIVED
BOARD OF SUPERVISORS
SAN FRANCISCO
2019 JUL - 1 AM 10:59
BY NA

Ben Bleiman

San Francisco, CA 94121

EXPERIENCE

Managing Partner, Tonic Nightlife Group

September 2008 – Present

- Personally grew business from a single bar to eleven bar/restaurants with gross revenues of \$13mm
- Oversees all operations and daily tasks from inventory to HR to direct customer service
- Currently own and operate Tonic, Bullitt, Dr. Teeth, and Soda Popinski
- Awarded Small Business Award by Mayor's Office
- Businesses have helped raise almost \$1mm for local charities through "guest bartending" program

President, SF Entertainment Commission

May 2017 – Present

- Work closely with Entertainment Commission staff to regulate and promote safe, robust nightlife in San Francisco
- Assist staff in fulfilling Mayor's Office priorities such as the new venue stabilization matching grant fund

Board Chairman, California Music & Culture Association

March 2014 – Present

- Manage the trade organization representing music venues, clubs, bars and music festivals in San Francisco
- Educate the public on issues that are most pressing to nightlife such as affordability and venue displacement
- Work closely with city officials to implement measures to strengthen nightlife community and the business of nightlife in SF

Founder, San Francisco Bar Owner Alliance

July 2013 – Present

- Founded and grew a group exclusively of bar owners in San Francisco from a handful to over 350 members today
- Maintain robust conversations in person and in private Facebook group on issues both small and large that affect bar owners in SF

Board Chairman, Aquarium of the Bay (Bay.org)

- Manage board of 14 members who oversee the largest environmental nonprofit to focus on the health of SF Bay and its watershed
- Spearhead ambitious remodel/reenvisioning of the Aquarium of the Bay into the world's first living museum dedicated to climate resiliency

EDUCATION

Bachelors of Arts, Georgetown University, Washington DC.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

1223301

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Bleiman, Ben

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City and County of San Francisco
Division, Board, Department, District, if applicable Your Position
Entertainment Commission Commissioner

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

Agency: _____ Position: _____

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

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

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

- Annual:** The period covered is January 1, 2018, through December 31, 2018 **Leaving Office:** Date Left ____/____/____
(Check one circle)
- or- The period covered is ____/____/____, through December 31, 2018 The period covered is January 1, 2018, through the date of leaving office.
- Assuming Office:** Date assumed ____/____/____ The period covered is ____/____/____, through the date of leaving office.
- Candidate:** Date of Election _____ and office sought, if different than Part 1: _____

4. Schedule Summary (must complete)

► Total number of pages including this cover page: 5

Schedules attached

- Schedule A-1 - Investments – schedule attached Schedule C - Income, Loans, & Business Positions – schedule attached
- Schedule A-2 - Investments – schedule attached Schedule D - Income – Gifts – schedule attached
- Schedule B - Real Property – schedule attached Schedule E - Income – Gifts – Travel Payments – schedule attached

-or-

None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
San Francisco CA 94121
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS

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 02/04/2019
(month, day, year)

Signature Ben Bleiman
(File the originally signed paper 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
<small>FAIR POLITICAL PRACTICES COMMISSION</small>
Name _____
Bleiman, Ben _____

▶ 1. BUSINESS ENTITY OR TRUST

Soda Popinski
 Name
 2209 Polk St.
 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 THIS BUSINESS	
Bar	
FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$0 - \$1,999	_____/_____/18 ____/____/18
<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	
<input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship <input checked="" type="checkbox"/> S-Corp _____ Other	
YOUR BUSINESS POSITION <u>Owner</u>	

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

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

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

None or Names listed below
 Salary/Distributions

▶ 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	_____/_____/18 ____/____/18
<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 _____ Other _____
Yrs. remaining

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

▶ 1. BUSINESS ENTITY OR TRUST

Teeth
 Name
 2323 Mission St.
 San Francisco, CA 94110
 Address (Business Address Acceptable)
 Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS	
Bar	
FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$0 - \$1,999	_____/_____/18 ____/____/18
<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	
<input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship <input checked="" type="checkbox"/> S-Corp _____ Other	
YOUR BUSINESS POSITION <u>Owner</u>	

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

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

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

None or Names listed below
 Salary/Distributions

▶ 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	_____/_____/18 ____/____/18
<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 _____ 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

Bleiman, Ben**▶ 1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

Tonic Nightlife Group

ADDRESS (Business Address Acceptable)

2209 Polk St.San Francisco, CA 94109

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Hospitality Management Company

YOUR BUSINESS POSITION

Managing PartnerGROSS INCOME RECEIVED No Income - Business Position Only \$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
(For self-employed use Schedule A-2.) Partnership (Less than 10% ownership. For 10% or greater use
Schedule A-2.) Sale of _____
(Real property, car, boat, etc.) Loan repayment Commission or Rental Income, list each source of \$10,000 or more(Describe) 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 No Income - Business Position Only \$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
(For self-employed use Schedule A-2.) Partnership (Less than 10% ownership. For 10% or greater use
Schedule A-2.) Sale of _____
(Real property, car, boat, etc.) Loan repayment Commission or Rental Income, list each source of \$10,000 or more(Describe) Other _____
(Describe)**▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

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

NAME OF LENDER*

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: _____