

File No. 141172

Committee Item No. 3

Board Item No. 31

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Rules Committee

Date November 20, 2014

Board of Supervisors Meeting

Date December 9, 2014

Cmte Board

- | | | |
|-------------------------------------|-------------------------------------|--|
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Motion |
| <input type="checkbox"/> | <input type="checkbox"/> | Resolution |
| <input type="checkbox"/> | <input 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 checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Department/Agency Cover Letter and/or Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Memorandum of Understanding (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 type="checkbox"/> | <input type="checkbox"/> | Application |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Form 700 |
| <input type="checkbox"/> | <input type="checkbox"/> | Vacancy Notice |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Information Sheet |
| <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>Resume</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ |

Completed by: Alisa Somera Date November 14, 2014
Completed by: Alisa Somera Date November 25, 2014

1 [Appointment, Successor Agency Commission (Commonly Known as Commission on
2 Community Investment and Infrastructure) - Mara Rosales]

3 **Motion confirming the Mayor's appointments of Mara Rosales to the Commission on**
4 **Community Investment and Infrastructure, Seat 4, for a four-year term ending**
5 **November 3, 2018.**

6
7 WHEREAS, Ordinance No. 215-12 was adopted by the Board of Supervisors and
8 signed by Mayor Edwin Lee on October 4, 2012; and

9 WHEREAS, Pursuant to Ordinance No. 215-12, the Mayor has submitted a
10 communication notifying the Board of Supervisors of the appointment of Mara Rosales to the
11 San Francisco Commission on Community Investment and Infrastructure, received by the
12 Clerk of the Board on November 13, 2014; now, therefore, be it

13 MOVED, That the Board of Supervisors hereby confirms the Mayor's appointment of
14 Mara Rosales to the San Francisco Commission on Community Investment and
15 Infrastructure, Seat 4, for a term of four years.

16
17
18
19
20
21
22
23
24
25

OFFICE OF THE MAYOR
SAN FRANCISCO



Leg Clerks, COB, Leg DD
CA, Rules
EDWIN M. LEE clerk
MAYOR CPag
AC File

Notice of Appointment

November 13, 2014

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

RECEIVED
BOARD OF SUPERVISORS
SAN FRANCISCO
NOV 13 PM 4:04
AK

Honorable Board of Supervisors:

It is my pleasure to notify you of the following reappointments to the Redevelopment Successor Commission (commonly known as Commission on Community Investment and Infrastructure), pursuant to Ordinance No. 215-12:

Marily Mondejar to Seat 2, for a term of four years

Mara Rosales to Seat 4, for a term of four years

I am confident that Ms. Mondejar and Ms. Rosales, electors of the City and County, will serve our community well. Attached are their qualifications to serve, which demonstrates how these appointments represent the communities of interest, neighborhoods and diverse populations of the City and County of San Francisco.

Should you have any questions related to this appointment, please contact my Director of Appointments, Nicole Wheaton, at (415) 554-7940.

Sincerely,

Edwin M. Lee
Mayor

OFFICE OF THE MAYOR
SAN FRANCISCO



EDWIN M. LEE
MAYOR

November 13, 2014

Angela Calvillo
Clerk of the Board, Board of Supervisors
San Francisco City Hall
1 Carlton B. Goodlett Place
San Francisco, CA 94102

Dear Ms. Calvillo,

It is my pleasure to notify you of the following reappointments to the Redevelopment Successor Commission (commonly known as Commission on Community Investment and Infrastructure), pursuant to Ordinance No. 215-12:

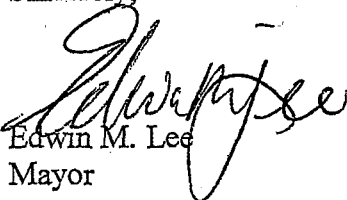
Marily Mondejar to Seat 2, for a term of four years

Mara Rosales to Seat 4, for a term of four years

I am confident that Ms. Mondejar and Ms. Rosales, electors of the City and County, will serve our community well. Attached are their qualifications to serve, which demonstrates how these appointments represent the communities of interest, neighborhoods and diverse populations of the City and County of San Francisco.

Should you have any questions related to this appointment, please contact my Director of Appointments, Nicole Wheaton, at (415) 554-7940.

Sincerely,


Edwin M. Lee
Mayor

MARA E. ROSALES, MANAGING PARTNER



Commission: Planning Commission

Diversity: Female / Latina

Personal: Lives in **San Francisco CA**

Education: B.A, Psychology, Magna cum Laude **San Francisco State University. J.D., Hastings College of the Law.**

Profession: Owner & Founder, Rosales Business Partners LLC (March 2010-Present)
Owner & Managing Partner, Rosales Law Partners LLP (June 2009-Present)
Special Counsel, Renne Sloan Holtzman Saki (April 2008-June 2009)
Partner, Meyers Nave Riback Silver & Wilson P.C. (January 2004-April 2008)
Airport General Counsel, **San Francisco International Airport** (May 1992-February 2003)
Deputy City Attorney, **San Francisco City Attorney's Office** (1983-1992)

Support:

Oppose: None to-date

Community: Mara's diverse practice includes the representation of the Port of Los Angeles, Trans bay Joint Powers authority, the **San Francisco Unified School District**, the City of Oakland, and airport concessionaires and construction related companies.
Vice-Chairperson, **San Francisco Commission on Community Investment & Infrastructure.**
Hispanas Organized for Political Equality (HOPE),
Airports Council International - North America (ACI-NA),
California Airport Attorneys Roundtable, San Francisco La Raza Lawyers Association.

Notes: Extensive experience in airport law, government law and public policy.
During her career, Mara has handled **approximately 150 civil litigation matters in California state** and federal trial and appellate courts, including more than **30 appellate matters, obtaining over 16 published decisions.**

San Francisco Hispanic Chamber of Commerce Latino Business Leader Professional Category - 2009

County Counsel's Litigation Award - 2003

San Francisco Commission on the Status of Women "Women Who Make A Difference" - 2000

CA State Bar Honorable Mention "Public Lawyer of the Year" - 1992

Interaction:
w/ Comm

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

 Date Received
 Official Use Only

 E-Filed
 03/18/2014
 12:30:41

 Filing ID:
 150408078

Please type or print in ink.

NAME OF FILER	(LAST)	(FIRST)	(MIDDLE)
Rosales, Mara Elizabeth			

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

Commission on Community Investment and Infrastructure

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)

- | | |
|--|---|
| <input type="checkbox"/> State | <input type="checkbox"/> Judge or Court Commissioner (Statewide Jurisdiction) |
| <input type="checkbox"/> Multi-County _____ | <input checked="" type="checkbox"/> County of <u>San Francisco</u> |
| <input checked="" type="checkbox"/> City of <u>San Francisco</u> | <input type="checkbox"/> Other _____ |

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

- | | |
|---|---|
| <input checked="" type="checkbox"/> Annual: The period covered is January 1, 2013, through December 31, 2013 | <input type="checkbox"/> Leaving Office: Date Left ____/____/____
(Check one) |
| -or- | <input type="checkbox"/> The period covered is January 1, 2013, through the date of leaving office. |
| The period covered is ____/____/____, through December 31, 2013 | <input type="checkbox"/> The period covered is ____/____/____, through the date of leaving office. |
| <input type="checkbox"/> Assuming Office: Date assumed ____/____/____ | |
| <input type="checkbox"/> 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: 6

- | | |
|---|---|
| <input type="checkbox"/> Schedule A-1 - Investments – schedule attached | <input checked="" type="checkbox"/> Schedule C - Income, Loans, & Business Positions – schedule attached |
| <input checked="" type="checkbox"/> Schedule A-2 - Investments – schedule attached | <input type="checkbox"/> Schedule D - Income – Gifts – schedule attached |
| <input checked="" type="checkbox"/> Schedule B - Real Property – schedule attached | <input checked="" type="checkbox"/> 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
<i>(Business or Agency Address Recommended - Public Document)</i>				
		San Francisco	CA	94104
DAYTIME TELEPHONE NUMBER		E-MAIL ADDRESS (OPTIONAL)		
()				

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

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

 Date Signed 03/18/2014
 (month, day, year)

 Signature Mara Elizabeth Rosales
 (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 _____

Rosales, Mara Elizabeth _____

▶ 1. BUSINESS ENTITY OR TRUST

Rosales Business Partners LLC
Name _____

San Francisco, CA 94104
Address (Business Address Acceptable) _____

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

GENERAL DESCRIPTION OF THIS BUSINESS

Consulting Firm

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

NATURE OF INVESTMENT
 Partnership Sole Proprietorship LLC _____
Other

YOUR BUSINESS POSITION Managing 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
FSP PPM Management, LLC

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

Rosales Law Partners LLP
Name _____

San Francisco, CA 94104
Address (Business Address Acceptable) _____

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

GENERAL DESCRIPTION OF THIS BUSINESS

Law Firm

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

NATURE OF INVESTMENT
 Partnership Sole Proprietorship _____
Other

YOUR BUSINESS POSITION Managing 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
City and County of San Francisco
JCDecaux North America
Yerba Buena Engineering

▶ 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	_____/_____/_____ ____/____/_____
<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: _____

Additional Single Sources of Income of \$10,000 or more for Rosales Law Partners LLP

Rubecon General Contracting, Inc.
BAF Specialty, Inc.
Turner Construction

SCHEDULE B
Interests in Real Property
 (Including Rental Income)

Name
 Rosales, Mara Elizabeth

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
 4096 17th Street, #306
 CITY
 San Francisco

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

ACQUIRED _____ 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
 Name(s) redacted

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

 CITY

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

ACQUIRED _____ 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 C

Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name
Rosales, Mara Elizabeth

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Rosales Law Partners LLP

ADDRESS (Business Address Acceptable)
San Francisco, CA 94104

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Law Firm

YOUR BUSINESS POSITION
Managing Partner

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
Rosales Business Partners LLC

ADDRESS (Business Address Acceptable)
San Francisco, CA 94104

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Consulting Firm

YOUR BUSINESS POSITION
Managing Partner

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 Draws
(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
Rosales, Mara Elizabeth

- 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 Federal Credit Union

ADDRESS (Business Address Acceptable)

CITY AND STATE
San Francisco, CA 94102

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
Not for Profit Community Bank

DATE(S): ___/___/___ - ___/___/___ AMT: \$ 0.00
(If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description Reimbursement for mandatory attendance in Credit Union conferences; phone/computer data plan costs

▶ 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: _____

San Francisco
BOARD OF SUPERVISORS

Date Printed: November 14, 2014

Date Established:

October 4, 2012

Active

SUCCESSOR AGENCY COMMISSION

Contact and Address:

Natasha Jones
One South Van Ness, 5th Floor
San Francisco, CA 94103

Phone: (415) 749-2458

Fax:

Email: natasha.jones@sfgov.org

Authority:

Board of Supervisors Ordinance No. 215-12; AB 1484.

Board Qualifications:

The Successor Agency Commission shall consist of five members appointed by the Mayor, subject to confirmation by a majority of this Board of Supervisors. The member appointed to Seat 1 shall be a resident of the supervisorial district that includes the largest amount of cumulative area of the Major Approved Development Projects. The member appointed to Seat 2 shall be a resident of the supervisorial district that includes the second largest amount of cumulative area of the Major Approved Development Projects. The members appointed to Seats 3, 4 and 5 need not reside in any specific supervisorial district. Each of the members shall serve for a term of four years. Each member of the Commission shall be a resident of the City and County of San Francisco.

Board of Supervisors Ordinance No. 215-12 delegates to the Successor Agency Commission (the "Commission") the authority (excluding authority as to Housing Assets to: (1) Act in place of the former commission of the dissolved Redevelopment Agency to implement, modify, enforce and complete the surviving redevelopment projects, including, without limitation, the Major Approved Development Projects, the Retained Housing Obligations, and all other enforceable obligations, except for those enforceable obligations for affordable housing transferred to the City and placed under the jurisdiction of the Mayor's Office of Housing; provided, however, that the Successor Agency Commission shall not modify the Major Approved Development Projects or the Retained Housing Obligations in any manner that would decrease the commitment of property tax revenue for affordable housing or materially change the obligations to provide affordable housing without obtaining the approval of the Board of Supervisors and any required approval of the Oversight Board. (2) Approve all contracts and

"R Board Description" (Screen Print)

San Francisco
BOARD OF SUPERVISORS

actions related to the assets transferred to or retained by the Successor Agency, including, without limitation, the authority to exercise land use, development and design approval authority for the Major Approved Development Projects and other surviving redevelopment projects, and the approval of amendments to redevelopment plans as allowed under the Redevelopment Dissolution Law and subject to adoption of such plan amendments by the Board of Supervisors and any required approval by the Oversight Board, consistent with applicable enforceable obligations. (3) Take any action that the Redevelopment Dissolution Law requires or authorizes on behalf of the Successor Agency and any other action that the Commission deems appropriate consistent with the Redevelopment Dissolution Law to comply with such obligations, including, without limitation, preparing and submitting to the Oversight Board each ROPS which shall include, among other things, the long term affordable housing obligations described in Oversight Board Resolution No. 5-2012, authorizing additional obligations in furtherance of enforceable obligations, and approving the issuance of bonds to carry out the enforceable obligations, subject to any approval of the Oversight Board as may be required under the Redevelopment Dissolution Law.

Report: Submit a Recognized Obligation Pay Schedule (ROPS) to the States' Department of Finance for each six-month period.

Sunset Clause: None.

