| File No. | 1300 | 13 |
|----------|------|----|
|----------|------|----|

| Committee Item No. | 4 | |
|--------------------|----|--|
| Board Item No | 16 | |

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

| Committee: Rules | Date _ | 1/17/·13 | , |
|---|-------------------------------------|------------|------------------|
| Board of Supervisors Meeting | Date _ | January 29 | 9, 2013 |
| Cmte Board | | V | |
| Motion Resolution Cordinance Legislative Digest Budget Analyst Report Legislative Analyst Report Youth Commission Report Introduction Form (for hearings) Department/Agency Cover Letter a MOU Grant Information Form Grant Budget Subcontract Budget Contract/Agreement Award Letter Application Public Correspondence | nd/or Rep | ort | |
| OTHER (Use back side if additional space i | is needed) | | - - - - |
| Completed by: Linda Wong Date Completed by: X.W. Date | te <u>1/14/ /</u> te <u>//29/</u> (| 3 | - |

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

[Appointments – Assessment Appeals Board No. 2]

Motion appointing Louisa Mendonza, Daniel Hershkowitz, Joyce Lewis, and Diana Daniel, terms ending September 7, 2015, to the Assessment Appeals Board No. 2.

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

Louisa Mendonza, seat 1, succeeding herself, term expired, must meet the eligibility criteria set forth in Section 1624.05 of the California Revenue and Taxation Code as follows: Must have a minimum of five years professional experience in the State of California as one of the following: Certified Public Accountant (CPA) or Public Accountant (PA); licensed Real Estate Broker; Attorney; or a Property Appraiser accredited by a nationally recognized professional organization, or Property Appraiser certified by the Office of Real Estate Appraisers; or he or she is a current member of an assessment appeals board. *Pursuant to Section 1623 the three year term will end on the first Monday in September, for the unexpired portion of a three-year term ending September 2, 2015.

Daniel Hershkowitz, seat 5, succeeding John McGary, term expired, must meet the eligibility criteria set forth in Section 1624.05 of the California Revenue and Taxation Code: Must have a minimum of five years professional experience in the State of California as one of the following: Certified Public Accountant (CPA) or Public Accountant (PA); licensed Real Estate Broker; Attorney; or a Property Appraiser accredited by a nationally recognized professional organization, or Property Appraiser certified by the Office of Real Estate

| Appraiser; or he or she is a current member of an assessment appeals board. *Pursuant to |
|---|
| Section 1623 the three year term will end on the first Monday in September, for the unexpired |
| portion of a three-year term ending September 7, 2015. |

Joyce Lewis, seat 5, (ALTERNATE /HEARING OFFICER), succeeding Donna Crowder, term expired, must meet the eligibility criteria set forth in Section 1624.05 of the California Revenue and Taxation Code: Must have a minimum of five years professional experience in the State of California as one of the following: Certified Public Accountant (CPA) or Public Accountant (PA); licensed Real Estate Broker; Attorney; or a Property Appraiser accredited by a nationally recognized professional organization, or Property Appraiser certified by the Office of Real Estate Appraiser; or he or she is a current member of an assessment appeals board. *Pursuant to Section 1623 the three year term will end on the first Monday in September, for the unexpired portion of a three-year term ending September 7, 2015.

Diana Daniel, seat 7, (ALTERNATE /HEARING OFFICER), succeeding Joyce Lewis, term expired, must meet the eligibility criteria set forth in Section 1624.05 of the California Revenue and Taxation Code: Must have a minimum of five years professional experience in the State of California as one of the following: Certified Public Accountant (CPA) or Public Accountant (PA); licensed Real Estate Broker; Attorney; or a Property Appraiser accredited by a nationally recognized professional organization, or Property Appraiser certified by the Office of Real Estate Appraiser; or he or she is a current member of an assessment appeals board. *Pursuant to Section 1623 the three year term will end on the first Monday in September, for the unexpired portion of a three-year term ending September 7, 2015.

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



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

| | his original Application to the Clerk of the Board of Supervisors |
|---|--|
| | Desert 1 alternate |
| Application for Appointr (Please circle one, | Board 2 or Board 2 alternate |
| available for public review, you may inform | aytime telephone number in the spaces provided. Because this form is a document your business/office address; telephone number and e-mail address in lieu of your home nation. |
| · · · · · · · · · · · · · · · · · · · | |
| Name: Louisa: ME | JDOZA Home Address: MLWWESSTA ST # O State: CA Zip code: 94107 |
| city: SAW FRANCUS | State: 7in Code: |
| Business Address: | City: State. 415824-3618 Work Phone: \$15.967.6943 Fax#: 415824-3618 E-Mail Address: 1 @ aol-Com . |
| Home Phone | Work Phone; 415 267 0745 |
| Pager#: | Work Phone; 215 3-10 1 0 14 1 |
| 10 mg / 10 mg | weekest alien mud is character for any construction |
| (If yes, please attach a stat | felony in this state, or convicted of any offense which, if committed in this state, o ement describing the offense(s) for which you have been convicted, s), and the court(s) that convicted you.) By the following qualifications are required: |
| Real Estate Appraiser or by the submitted with this application in nominated for appointment to the Please state your qualifications: | , |
| | A CONTRACTOR OF THE CONTRACTOR |
| Please state your business and/or | professional experience: |
| Occupation: | Education: |
| Civic Activities: | |
| Ethnicity (optional): | Sex (optional): M K |
| Other Personal Information (option | nal) |
| Would you be able to attend Day I How many days a week would you | Meetings? |
| Lafara Aba Di | JLES COMMITTEE is a requirement before any appointment can be made. use Note: Your application will be retained for one year. |
| Date: 8/16/2012 | Applicant's Signature: |
| For Office Use Only: Appointed | o Board #:432 Seat #: Term Expires: |

LOUISA MENDOZA Innesota Street, Suite C SAN FRANCISCO CA 94107 (415)

GENERAL OVERVIEW

A team player with excellent organizational, communication, and interpersonal skills. Dependable, resourceful and detail oriented.

PROFESSIONAL EXPERIENCE

MARKETING & SALES:

- Real Estate Broker: Consult and conduct the sales and purchase of Residential & Commercial Real Estate, provide Broker Price Opinion-property valuation reports, on market values, to Lending Institutions. Board Member: Permanent Member Board #2, Substitute Member Board #1, and Hearing Officer. Real Estate & Insurance Services., and San Francisco Assessment Appeals Board.
- <u>Import & Export Sales Representative</u>: Research and sales of Fire and Security products for purchasing and distribution to international markets. **Firsec Limited**.

FINANCE & INSURANCE:

- <u>Mortgage Broker</u>: Review In-House underwriting of residential and mix-use loans, and the supervision of industry compliance, and budgetary control. <u>Insurance Agent</u>: Marketing and sales of life, property & causality insurance.

M & M Financial Services, Golden Gate Home Financial & Philip Fraher & Company.

EMPLOYMENT HISTORY

| 1989-Present | Real Estate Broker, Leasing Agent | Real Estate & Insurance Services |
|--------------|-----------------------------------|----------------------------------|
| 2006-Present | Managing Broker Owner | M & M Financial Services |
| 2006-Present | Board Member #2 | S.F.A.A.B |
| 2002-Present | Insurance Consultant | Fraher & Company |
| 1986-1992 | Research and Sales | Firsec Limited |

EDUCATION

B.S., Finance, Golden Gate University: San Francisco, Ca., Real Estate Broker, Mortgage Broker, Insurance Agent, Software training in Accounting, Loans and Property Management packages.

ACTIVITIES

Board of Realist: Women's Council. Member. The Travelers Club: President.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS OF SUPER VOOR SAN FRANCISCO

2012 MAR 30 PM 5COVER PAGE

2012 HAR 30 PM 2: 39

| Please type or print in ink. | <u> </u> | | | | <u> </u> |
|-------------------------------|--|---|--|---------------------------------------|---|
| NAME OF FILER | (LAST) SAME | COMMISSION | (FIRST) | 5 Y X X | (MIDDLE) |
| _ | MENDOZA | | LOUIGA | | <u>, , , , , , , , , , , , , , , , , , , </u> |
| 1. Office, Agency, or | | , , , , , , , , , , , , , , , , , , , | | | |
| Agency Name BOARD OF S | SUPERVISORS | | BOARD MEM | BER | |
| Division, Board, Departme | ent, District, if applicable | | Your Position | | |
| ASSESSMENT | APPEALS BOARD | | | · · · · · · · · · · · · · · · · · · · | <u></u> |
| ► If filling for multiple por | sitions, list below or on an attachm | nent | | | • • • • |
| Agency: | 1. | · · · · · · · · · · · · · · · · · · · | Position: | | |
| 2. Jurisdiction of Of | fice (Check at least one box) | | | i e je | |
| ☐ State | | / | ☐ Judge or Court Cor | nmissioner (Statewic | le Jurisdiction) |
| Multi-County | | <u> </u> | ☑ County of — San | . Francisc | |
| City of san Fr | ancisco | | ☐ Other | | |
| Man a man m | | | | | |
| 3. Type of Statemen | | | | | |
| Annual: The period | covered is January 1, 2011, through | gh | Leaving Office: D | | |
| December -or- | • | through 1. | ٠ | | 011, through the date o |
| . The period December | covered is/ | , ugougn | leaving office. | | |
| Assuming Office: 1 | Date assumed | | O The period cov the date of lear | | , through |
| Candidate: Election | YearOff | fice sought, if different | than Part 1: | | |
| 4. Schedule Summa | | ► Total nur | mber of pages incl | uding this cove | r page: _4 |
| Schedule A-2 · Inve | stments – schedule attached stments – schedule attached Property – schedule attached | s | chedule C - Income, Lochedule D - Income - chedule E - Income - | Gifts - schedule atta | sched |
| St. Octivation D. Model | , applied to the second | -or- | | . N. 1 | |
| 1 | ☐ None - No | -reportable interests o | n any schedule | | |
| 5. Verification | | | | | |
| MAILING ADDRESS | STREET | CITY | · | STATE | ZIP CODE |
| (Business or Agency Address R | | San Franci | sco. CA. 94 | 1107 | • |
| DAYTIME TELEPHONE NUMBE | | | IL ADDRESS (OPTIONAL) | • | |
| | | · l <u> </u> | · | <u> </u> | |
| have used all reasonable | e diligence in preparing this statement and schedules is true and complete. | ent. I have reviewed t acknowledge this is | his statement and to the s a public document. | best of my knowled | ge the information conta |
| • | of perjury under the laws of the | • | | | ·. |
| , and an an an animal | | | • • | | |
| Date SignedMarc | h 19 2012 | Signat | ure _ | | B(°). |
| | ferming majt boots | | | | |

FPPC Form 700 (2011/2012) 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 FAIR POLITICAL PE | FORM | 70 | |
|---|---------------------------------|--------|------------|--|
| ĺ | Name | | | |
| | Louisa M | endoza | a . | |

| LAME OF DUOMICOO' PURITY | |
|--|--|
| NAME OF BUSINESS ENTITY | ► NAME OF BUSINESS ENTITY |
| Fidelity Mutual Funds | |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
| Investments | |
| FAIR MARKET VALUE | FAID MADIZET MALUE |
| | FAIR MARKET VALUE |
| \$2,000 - \$10,000 | \$10,001 - \$100,000 |
| S100,001 - \$1,000,000 Over \$1,000,000 | 5100,001 - \$1,000,000 Over \$1,000,000 |
| NATURE OF INVESTMENT ☑:Stock □ Other | NATURE OF INVESTMENT |
| (Describe) | (Describe) |
| Partnership O Income Received of \$0 - \$499 | Partnership O Income Received of \$0 - \$499 |
| O Income Received of \$500 or More (Report on Schedule C) | O Income Received of \$500 or More (Report on Schedule C) |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: |
| The state of the s | " AT LICABLE, LIGT DATE. |
| | <u> / / 11 </u> |
| ACQUIRED DISPOSED | ACQUIRED DISPOSED |
| ► NAME OF BUSINESS ENTITY | ► NAME OF BUSINESS ENTITY |
| The state of the s | P ITAMIL OF BUSINESS ENTITY |
| | |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
| | |
| | |
| FAIR MARKET VALUE | FAIR MARKET VALUE |
| \$2,000 - \$10,000 \$10,001 - \$100,000 | \$2,000 - \$10,000 |
| S100,001 - \$1,000,000 Over \$1,000,000 | S100,001 - \$1,000,000 Over \$1,000,000 |
| WITHER OF HEIGHT | |
| NATURE OF INVESTMENT | NATURE OF INVESTMENT |
| Stock Other (Describe) | Stock Other (Describe) |
| Partnership O Income Received of \$0 - \$499 | Partnership O Income Received of \$0 - \$499 |
| O income Received of \$500 or More (Report on Schedule C) | O Income Received of \$500 or More (Report on Schedule C) |
| | |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: |
| | |
| 100000000 | |
| ACQUIRED DISPOSED | ACQUIRED DISPOSED |
| ► NAME OF BUSINESS ENTITY | ► NAME OF BUSINESS ENTITY |
| | A Secretary Section |
| | |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
| AND THE STATE OF T | ***** |
| 3.2 | The Committee of the Co |
| FAIR MARKET VALUE | FAIR MARKET VALUE |
| \$2,000 - \$10,000 \$10,001 - \$100,000 | \$2,000 - \$10,000 \$10,001 - \$100,000 |
| \$100,001 - \$1,000,000 | S100,001 - \$1,000,000 Over \$1,000,000 |
| MATIDE OF INVESTMENT | MATINE OF UNPOTTION |
| NATURE OF INVESTMENT Stock Other | NATURE OF INVESTMENT |
| (Describe) | Stock Other (Describe) |
| Partnership O Income Received of \$0 - \$499 | Partnership O Income Received of \$0 - \$499 |
| O Income Received of \$500 or More (Report on Schedule C) | O Income Received of \$500 or More (Report on Schedule C) |
| IE ADDI ICADI E LICT DATE. | |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: |
| | / |
| ACQUIRED DISPOSED | ACQUIRED DISPOSED |
| 1. | 2,5,000 |
| | |
| Comments: | • |

SCHEDULE B Interests in Real Property (Including Rental Income)

| CALIF | ORNIA FOR | RIVE 7/00 Es commission |
|-------|-----------|----------------------------|
| Name. | | |
| Loui | sa Mend | loza |

| ► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS | ► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS |
|--|---|
| 88 Orsi Circle | |
| CITY | CITY |
| San Francisco, CA 94124 | · |
| FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 | FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 |
| NATURE OF INTEREST | NATURE OF INTEREST |
| ☑ Ownership/Deed of Trust ☐ Easement | Ownership/Deed of Trust Easement |
| Leasehold Dther | Leasehold Other |
| IF RENTAL PROPERTY, GROSS INCOME RECEIVED | IF RENTAL PROPERTY, GROSS INCOME RECEIVED |
| \$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000 | \$50 - \$499 \$500 - \$1,000 \$1,001 - \$10,000 |
| \$10,001 - \$100,000 OVER \$100,000 | S10,001 - \$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. | 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. |
| gapagett storers are the second | |
| A state of the western state of the | |
| Service of the servic | |
| * You are not required to report loans from commercial lend business on terms available to members of the public with loans received not in a lender's regular course of busines | hout regard to your official status. Personal loans and |
| NAME OF LENDER* | NAME OF LENDER* |
| Alliant Credit Union | |
| ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| event to the first the first | All Marie Control of the Control of |
| BUSINESS ACTIVITY, IF ANY, OF LENDER | BUSINESS ACTIVITY, IF ANY, OF LENDER |
| Wholesale Lender/Financial Inst. | |
| INTEREST RATE TERM (Months/Years) | INTEREST RATE . TERM (Months/Years) |
| 5 - 75 None — | % None ~ |
| | |
| HIGHEST BALANCE DURING REPORTING PERIOD | HIGHEST BALANCE DURING REPORTING PERIOD |
| ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000 | \$500 - \$1,000 \$1,001 - \$10,000 |
| ☐ \$10,001 - \$100,000 ☑ OVER \$100,000 | S10,001 - \$100,000 OVER \$100,000 |
| ☐ Guarantor, if applicable | Guarantor, if applicable |
| | |
| Comments: | |

FPPC Form 700 (2011/2012) Sch. B FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

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

| CALIFORI | VIA FORM | |
|----------|-----------|----------|
| Name | | |
| Louisa | Mendoza · | <i>:</i> |

| 1 INCOME RECEIVED | Pri INCOME RESERVED |
|---|--|
| NAME OF SOURCE OF INCOME | NAME OF SOURCE OF INCOME |
| M & M Financial Services | |
| ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| | |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| | BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| Financing YOUR BUSINESS POSITION | VOUD PLICEUTED POPUTOU |
| | YOUR BUSINESS POSITION |
| Mortgage Broker | |
| GROSS INCOME RECEIVED | GROSS INCOME RECEIVED |
| \$5,00 - \$1,000 | ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000 |
| \$10,001 - \$100,000 DVER \$100,000 | ☐ \$10,001 - \$100,000 ☐ OVER \$100,000 |
| CONSIDERATION FOR WHICH INCOME WAS RECEIVED | CONSIDERATION FOR WHICH INCOME WAS RECEIVED |
| Salary Spouse's or registered domestic partner's income | Salary Spouse's or registered domestic partner's income |
| ☐ Loan repayment ☐ Partnership | <u> </u> |
| | Loan repayment Partnership |
| Sale of(Real property, car, boat, etc.) | Sale of(Real property, car, boat, etc.) |
| ## P | |
| Commission or Rental Income, list each source of \$10,000 or more | Commission or Rental Income, list each source of \$10,000 or more |
| | <u> </u> |
| We set the set of the | |
| Other(Describe) | Other(Describe) |
| (2000.00) | (Describe) |
| 2 Loans received or outstanding during the reporting per | NOD |
| You are not required to report loans from commercial le retail installment or credit card transaction, made in the members of the public without regard to your official sta regular course of business must be disclosed as follows: | lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's |
| NAME OF LENDER*** A SAME SAME SAME SAME SAME SAME SAME SA | INTEREST RATE TERM (Months/Years) |
| ADDRESS (Business Address Acceptable) | % None |
| हरिक्षा है के प्राप्त कर किया है। यह किया किया किया है किया कर है किया है कि उस है किया है कि उस है किया है कि विकास कर है कि उस है किया है कि उस है कि उस है कि उस है किया है कि उस है क | SECURITY FOR LOAN |
| BUSINESS ACTIVITY, IF ANY, OF LENDER | None Personal residence |
| SUSINESS ACTIVITY, IF ANT, OF LENDER | |
| | Real Property |
| HIGHEST BALANCE DURING REPORTING PERIOD | Street address |
| _ \$500 - \$1,000 | |
| \$1,001 - \$10,000 | ·. City |
| | Guarantor |
| OVER \$100,000 | • |
| | Other |
| | (Describe) |
| | |
| | |
| Comments: | |

FPPC Form 700 (2011/2012) Sch. C FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

RECEIVED

JCT 1 7 2012

Assessment Appeals Board

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



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

| Complete and return this orig | |
|--|--|
| Application for Appointment to (Please circle one) | Board 1 or Board 1 alternate Board 2 or Board 2 alternate |
| | elephone number in the spaces provided. Because this form is a document ness/office address, telephone number and e-mail address in lieu of your home |
| you authorize release of your private/pers | sonal information? To ves no |
| Daniel Hershkowitz ame: | Home Address: |
| San Francisco Vi | State: Zip code: |
| siness Address: | City: State: Zip Code: |
| ome Phone_415 W | ork Phone: Fax #: |
| ager#: | -iylali Addi Casi |
| e you a United States citizen, or a resident | t alien who is eligible for and has applied for citizenship? 🔼 Yes 🗌 N |
| the date of the conviction(s), and the cursuant to Ordinance No. 393-98 the followard A person shall not be eligible for | lowing qualifications are required: nomination for membership on an assessment appeals board unle refersional experience in this state as one of the following: certifie |
| the date of the conviction(s), and the ursuant to Ordinance No. 393-98 the following the person shall not be eligible for a countant or public accountant, if y a nationally recognized professional and the state of | le counts) that convicted you.) Illowing qualifications are required: nomination for membership on an assessment appeals board unle rofessional experience in this state as one of the following: certifie licensed real estate broker, attorney, or property appraiser accredit organization, or property appraiser certified by either the Office of |
| the date of the conviction(s), and the ursuant to Ordinance No. 393-98 the following the person shall not be eligible for a countant or public accountant, if y a nationally recognized professional cleal Estate Appraiser or by the State Bosto bubmitted with this application form. The | le counts) that convicted you.) Illowing qualifications are required: nomination for membership on an assessment appeals board unle- rofessional experience in this state as one of the following: certifie- licensed real estate broker, attorney, or property appraiser accredit organization, or property appraiser certified by either the Office of and of Equalization. Documentation of qualifying experience must be is requirement does not apply to incumbent board members |
| the date of the conviction(s), and the ursuant to Ordinance No. 393-98 the following the person shall not be eligible for a constant or public accountant, if y a nationally recognized professional of the eligible that the state Board with this application form. This ominated for appointment to their same | le counts) that convicted you.) Illowing qualifications are required: nomination for membership on an assessment appeals board unler rofessional experience in this state as one of the following: certified licensed real estate broker, attorney, or property appraiser accredit organization, or property appraiser certified by either the Office of ard of Equalization. Documentation of qualifying experience must be is requirement does not apply to incumbent board members e seats. |
| the date of the conviction(s), and the ursuant to Ordinance No. 393-98 the following a person shall not be eligible for a person shall not be eligible for a public accountant, I are a nationally recognized professional of the east extra professional or a personal committed with this application form. This cominated for appointment to their same a real lease state your qualifications: | le counts) that convicted you.) Iowing qualifications are required: nomination for membership on an assessment appeals board unle rofessional experience in this state as one of the following: certifie licensed real estate broker, attorney, or property appraiser accredit organization, or property appraiser certified by either the Office of ard of Equalization. Documentation of qualifying experience must be is requirement does not apply to incumbent board members a seats. eal estate broker and real estate attorney with 15 years |
| the date of the conviction(s), and the ursuant to Ordinance No. 393-98 the following a person shall not be eligible for a person shall not be eligible for a public accountant or public accountant, if y a nationally recognized professional of the east at the end of the state Board and the east at the end of | lowing qualifications are required: nomination for membership on an assessment appeals board unler rofessional experience in this state as one of the following: certified licensed real estate broker, attorney, or property appraiser accredit organization, or property appraiser certified by either the Office of and of Equalization. Documentation of qualifying experience must be in requirement does not apply to incumbent board members a seats. Lawyer and real estate attorney with 15 years real estate — 11 years exclusively in San Francisco |
| the date of the conviction(s), and the cursuant to Ordinance No. 393-98 the following a person shall not be eligible for a countant or public accountant, it is a nationally recognized professional of the eal Estate Appraiser or by the State Board by a nationally recognized professional of the eal Estate Appraiser or by the State Board by the Board by the State Board by the State Board by the Board by the State Board by the State Board by the State Board by the State Board by the Board b | lowing qualifications are required: nomination for membership on an assessment appeals board unler rofessional experience in this state as one of the following: certified licensed real estate broker, attorney, or property appraiser accredit organization, or property appraiser certified by either the Office of and of Equalization. Documentation of qualifying experience must be is requirement does not apply to incumbent board members a seats. Leal estate broker and real estate attorney with 15 years real estate — 11 years exclusively in San Francisco Lawyer, Real Estate Broker, Consultant, and experience: |
| the date of the conviction(s), and the ursuant to Ordinance No. 393-98 the following a person shall not be eligible for a person shall not be eligible for a property of a nationally recognized professional of the east at the Appraiser or by the State Board bubmitted with this application form. The commanded for appointment to their same lease state your qualifications: I am a recontinuous experience in residential dease state your business and/or profession and the profession and th | lowing qualifications are required: nomination for membership on an assessment appeals board unler rofessional experience in this state as one of the following: certified licensed real estate broker, attorney, or property appraiser accreditionalization, or property appraiser certified by either the Office of and of Equalization. Documentation of qualifying experience must be is requirement does not apply to incumbent board members a seats. Leal estate broker and real estate attorney with 15 years real estate — 11 years exclusively in San Francisco Lawyer, Real Estate Broker, Consultant, and experience: BA (Business Management)//Juris Doct |
| the date of the conviction(s), and the cursuant to Ordinance No. 393-98 the following a person shall not be eligible for the or she has a minimum of five years' public accountant or public accountant, if y a nationally recognized professional of the east at the end of the state Board beat Estate Appraiser or by the State Board beat Estate Appraiser or by the State Board beat end of the end of | lowing qualifications are required: nomination for membership on an assessment appeals board unlex rofessional experience in this state as one of the following: certified licensed real estate broker, attorney, or property appraiser accredit organization, or property appraiser certified by either the Office of and of Equalization. Documentation of qualifying experience must be is requirement does not apply to incumbent board members eseats. eal estate broker and real estate attorney with 15 years real estate 11 years exclusively in San Francisco broad experience: Lawyer, Real Estate Broker, Consultant, and Professor of Mediation & ADR. Local Community Volunteer Education: BA (Business Management)//Juris Doct ild Abuse Prevention Center; 2) SF Stonestown YMCA |
| the date of the conviction(s), and the cursuant to Ordinance No. 393-98 the following a person shall not be eligible for the or she has a minimum of five years' public accountant or public accountant, if y a nationally recognized professional of the eal Estate Appraiser or by the State Board bubmitted with this application form. This commanded for appointment to their same allease state your qualifications: I am a residential disability of the profession of | lowing qualifications are required: nomination for membership on an assessment appeals board unler rofessional experience in this state as one of the following: certified licensed real estate broker, attorney, or property appraiser accredit organization, or property appraiser certified by either the Office of and of Equalization. Documentation of qualifying experience must be is requirement does not apply to incumbent board members as easts. Leal estate broker and real estate attorney with 15 years real estate — 11 years exclusively in San Francisco Lawyer, Real Estate Broker, Consultant, and experience: Lawyer, Real Estate Broker, Consultant, BA (Business Management)//Juris Doct Education: BA (Business Management)//Juris Doct Sex (optional): N M F |
| the date of the conviction(s), and the ursuant to Ordinance No. 393-98 the following a person shall not be eligible for the or she has a minimum of five years' public accountant or public accountant, if y a nationally recognized professional of the electric state Appraiser or by the State Board bubmitted with this application form. The cominated for appointment to their same allease state your qualifications: I am a recontinuous experience in residential decrease state your business and/or profession expert witness, Committee Chair, Adjunction in the electric state of the electric state | lowing qualifications are required: nomination for membership on an assessment appeals board unless refessional experience in this state as one of the following: certified licensed real estate broker, attorney, or property appraiser accredit organization, or property appraiser certified by either the Office of and of Equalization. Documentation of qualifying experience must be its requirement does not apply to incumbent board members eseats. Leal estate broker and real estate attorney with 15 years real estate — 11 years exclusively in San Francisco Lawyer, Real Estate Broker, Consultant, and experience: Lawyer, Real Estate Broker, Consultant, BA (Business Management)//Juris Doct Education: Education: Sex (optional): M F |
| the date of the conviction(s), and the fursuant to Ordinance No. 393-98 the following and the person shall not be eligible for a person shall not be eligible for a public accountant or public accountant, if y a nationally recognized professional of the eligible forms and the state Appraiser or by the State Board beal Estate Appraiser or by the State Board beal estate with this application form. This committed with this application form. This committed for appointment to their same elease state your qualifications: I am a recontinuous experience in residential elease state your business and/or profession expert witness, Committee Chair, Adjustication: Real tor/Attorney/Expert Civic Activities: Board Member: 1) SF Chief thinicity (optional): Other Personal Information (optional) Nould you be able to attend Day Meetings? How many days a week would you be available as you attended an Assessment Appeals | lowing qualifications are required: nomination for membership on an assessment appeals board unless refessional experience in this state as one of the following: certified licensed real estate broker, attorney, or property appraiser accredition of property appraiser accredition of Equalization. Documentation of qualifying experience must be its requirement does not apply to incumbent board members eseats. The early estate broker and real estate attorney with 15 years real estate broker and real estate attorney with 15 years real estate 11 years exclusively in San Francisco Lawyer, Real Estate Broker, Consultant, and experience: BA (Business Management)//Juris Docted Education: BA (Business Management)//Juris Docted Education: BA (Business Management)// Buris Docted Education: BA (Sylves No Night meetings? Yes No able for hearings? Three-four Seard meeting? Yes No |
| the date of the conviction(s), and the fursuant to Ordinance No. 393-98 the following and the person shall not be eligible for a constant or she has a minimum of five years' public accountant or public accountant, by a nationally recognized professional of the least extended an Assessment Appeals and the personal distribution form. The production of the least extended an Assessment Appeals Appearance before the RULES College of the State Bost and the least extended an Assessment Appeals Appearance before the RULES College of the least extended an Assessment Appeals Appearance before the RULES College of the least extended an Assessment Appeals Appearance before the RULES College of the RULES C | lowing qualifications are required: nomination for membership on an assessment appeals board unler rofessional experience in this state as one of the following: certified licensed real estate broker, attorney, or property appraiser accredit organization, or property appraiser certified by either the Office of and of Equalization. Documentation of qualifying experience must be is requirement does not apply to incumbent board members eseats. Leal estate broker and real estate attorney with 15 years real estate 11 years exclusively in San Francisco Lawyer, Real Estate Broker, Consultant, and experience: Lawyer, Real Estate Broker, Consultant, and Experience: BA (Business Management)//Juris Doctified Abuse Prevention Center; 2) SF Stonestown YMCA Sex (optional): M F ase read my profile at www.Mrdantastic.com Night meetings? Yes No No Night meetings? Yes No MMITTEE is a requirement before any appointment can be made. Your application will be retained for one year. |

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

| Please type or print in ink. | | |
|--|--|----------------------------------|
| NAME OF FILER (LAST) | (FIRST) | (MIDDLE) |
| Hershkowitz Daniel | | Adam |
| 1. Office, Agency, or Court | | |
| Agency Name | | |
| Board of Supervisors Division, Board, Department, District, if applicable | Your Pesition. | |
| Assessment Appeals Board | Assessment Appeals Board | |
| ➤ 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 (State | • |
| 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, 2011, through December 31, 2011. The period covered is January 1, 2017 - 1, 2017 - 2, 2017 The period covered is January 1, 2017. The period covered is January 1 | Leaving Office: Date Left | E, 2011, through the date of |
| 4. Schedule Summary Check applicable schedules or "None." ➤ Total n | number of pages including this co | over page: _5 |
| Schedule A-1 - Investments – schedule attached Schedule A-2 - Investments – schedule attached Schedule B Real Property – schedule attached -or- None - No reportable interests | Schedule C - <i>Income, Loans, & Business</i> Schedule D - <i>Income - Gifts -</i> schedule Schedule E - <i>Income - Gifts - Travel Pa</i> s on any schedule | attached |
| 5. Verification MALING ADDRESS STREET (Business of Agency Address Recommended - Printer Document) LUS DAYTIME TELEPHONE | FRANCISCO CA STATE -MANIFADUREDO (URTI MUNNI) | 94137. ZIP CODE 2003 - COM |
| I have used all reasonable diligence in preparing this statement. I have reviewe herein and in any attached schedules is true and complete. I acknowledge this | is is a public document. | ledge the information contained |
| Certify under penalty of perjury under the laws of the State of California OI 7 2013 Date Signed Sign | nature Date the originally signed statement | with your diling chlicial.) |

SCHEDULE A-1 Investments

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

| CALIFORNIA FORM FAIR POLITICAL PRACTICES CO | 700 |
|---|--------|
| DAVIEL HEISHK | low tz |

| ► NAME OF BUSINESS ENTITY | ► NAME OF BUSINESS ENTITY |
|--|--|
| Morgan Stanley IRA and Investment Accounts | |
| Morgan Stanley INA and Investment Accounts | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY | |
| Morgan Stanley IRA and Investment Accounts | YMCA Retirement Fund (Alyssa Hershkowitz) |
| FAIR MARKET VALUE | FAIR MARKET VALUE |
| 510,000 - \$10,000 S10,000 S10,000 S100,000 | ☐ \$2,000 - \$10,000 |
| X \$100,001 - \$1,000,000 | S190,001 - \$1,090,600 Over \$1,000,000 |
| | NATURE OF INVESTMENT |
| NATURE OF INVESTMENT Stocks & Bonds Stock Stock Stocks & Bonds | NATURE OF INVESTMENT Mix of IRA retiremnet funds (Describe) |
| (Describe) | Partnership O Income Received of \$0 - \$499 |
| Partnership O.Income Received of \$500 or More Reportion Schedule Cl | O Income Received of \$500 or More (Report on Schedule C) |
| · | IT ADDISCADIT LIGT DATE: |
| IF APPLICABLE, LIST DATE: | , if Applicable, list date: |
| / / 11 | 1 11 11 |
| ACQUIRED DISPOSED | ACQUIRED DISPOSED |
| ► NAME OF BUSINESS ENTITY | NAME OF BUSINESS ENTITY |
| P WASE OF COOKSESS TO SEE | <u> </u> |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
| GENERAL DESCRIPTION OF ESSENTIAL | |
| | |
| FAIR MARKET VALUE | FAIR MARKET VALUE |
| \$2,000 - \$10,000 | \$2,000 - \$10,000 |
| D O TOTAL OF THE PART OF THE P | 5100,001 - \$1,000,000 Over \$1,000,000 |
| | NATURE OF INVESTMENT |
| NATURE OF INVESTMENT | Stock Other |
| Stock Officer (Bescribe) | (Describe) |
| Partnership O income Received of \$0 - \$499 O income Received of \$500 or More (Report on Schedule C) | Partnership: () Income: Received of \$50 - \$499 () Income: Received of \$500 or More: Report on Schedule C) |
| TOU | |
| | IF APPLICABLE, LIST DATE: |
| F APPLICABLE LIST DATE: | |
| \$ 6 / 11 / 11 ACCUMBED BISPOSED | J 11 J 11 ACQUIRED DISPOSED |
| ACCOUNTY, STORTON | ACCONCED |
| NAME OF BUSINESS ENTITY | ► NAME OF BUSINESS ENTITY |
| NAME OF BUSINESS ENTITY | |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
| \$ 1 | |
| ю ¢ | |
| F C FAIR MARKET VALUE | FAIR MARKET VALUE |
| Ø | \$2,000 - \$10,000 |
| T and dot a market and the state of the stat | 5100,001 - \$1,000,000 Over \$1,000,000 |
| NATURE OF INVESTMENT | NATURE OF INVESTMENT |
| | Stock Cother |
| (Describe) | (Describe) Partinership O Income Received of \$0 - \$499: |
| Partnership. O Income Received of \$0 - \$499. O Income Received of \$500 or More (Report on Schedule C) | O Income Received of \$500 or More (Report on Schedule C) |
| | |
| O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: 11 | IF APPLICABLE, LIST DATE: |
| 2 111 111 | <u> </u> |
| | ACQUIRED DISPOSED (PANIC ACCURAS) |
| | i i i i i i i i i i i i i i i i i i i |
| To comments: * All of our movey that two investment Retire Accounts. | TIS NOT IN CASH I SIN INESE |
| Two investment Retires Accounts | EMENH [IRA PPC. Form 700 (2011/2012) Sch. A-1 |
| Account to | FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov |
| E L | 1/7/2013. |
| VIII WOL | 440 |

SCHEDULE A-2

Investments, Income, and Assets of Business Entities/Trusts. (Ownership Interest is 10% or Greater)

| CALIFORN | Le codi | . 7 | M |
|----------------|----------|--------|--------|
| CALIFURN | ia furi | | U |
| FAIR POLITICAL | PRACTICE | s comm | ISSION |

Name

Daniel Hershkowitz

| 1. BUSINESS ENTITY OR TRUST | ► 1. BUSINESS ENTITY OR TRUST |
|---|---|
| | |
| lame: | Name |
| düress (Business Address Acceptable) | Address (Business Address Acceptable) |
| reck one Taust, go to 2 Business Entity, complete the box, then go to 2 | Check one |
| ENERAL DESCRIPTION OF BUSINESS ACTIVITY | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
| AIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0\$1,999 | FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0\$1,999 |
| ATURE OF INVESTMENT] Sole Proprietorship | NATURE OF INVESTMENT Sole Proprietorship. Partnership. Cither YOUR BUSINESS POSITION |
| 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR FRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) | ➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) |
| \$0-\$499 | ☐ \$0:- \$499: ☐ \$10;001 - \$190,000 ☐ \$500:- \$1,000 ☐ OVER: \$100;000 ☐ \$1,001 - \$16;000 |
| 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR WORE (Attach a separate street if necessary.) | ➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) |
| | |
| 4. Investments and interests in real property Held <u>by</u> the business entity or trust Check one box INVESTMENT REAL PROPERTY | ➤ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST Check one-box: INVESTMENT REAL PROPERTY |
| ame of Business Entity, if Investment, or ssessor's Parcel Number or Street Address of Real Property | Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property |
| | |
| escription of Business Activity or: ity or Other Precise Location of Real Property | Description of Business Activity or City or Other Precise Location of Real Property |
| AR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 | FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000:-\$10,000: \$10,001 - \$100,000 |
| ATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership | NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership |
| Leasehold Yrs. remaining Other | Leasehold Yrs. remaining Other |
| Check box if additional schedules reporting investments or real property are attached APPICATILE—WRA W. Comments: 19 400 1 200 2 50 150 150 150 150 150 150 150 150 150 | Check box if additional schedules reporting investments of real property are attached TOUN A 605 WES INFECT IN ANY BUSINES FPPC Form 700 (2011/2012).Sch. A-2 |
| June His - 11 | EXTS AND FPPC TOIL-Free Helpline: 866/275-3772 www.fipc.ca.gov 7/10/3 FIMAN Y Self employed. |

SCHEDULE B Interests in Real Property (Including Rental Income)

| CALIFORNIA FORM | |
|--------------------|--|
| Name | |
| Daniel Hershkowitz | |

| CITY FAIR MARKET VALUE SAUDU- \$100,000 | | ➤ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS |
|---|--|---|
| FAR MARKET VALUE SOLDSIG.000 SOLDSIG. | ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS | ASSESSOR & PARCEL RUMBER ON STREET ADDITION |
| FAR MARKET VALUE SOLDSIG.000 SOLDSIG. | | Crev- |
| \$2,000 - \$10,000 111 131 | CITY | |
| STO,001 - \$100,000 | 17 300 100 1 100 1 | |
| \$100,007 - \$1,000,000 ACQUIRED DISPOSED \$100,000 ACQUIRED DISPOSED \$100,000 ACQUIRED DISPOSED \$100,000 ACQUIRED DISPOSED \$100,000 ACQUIRED DISPOSED Over \$1,000,000 ACQUIRED DISPOSED ACQUIRED DIS | — | S10.001 - \$100.000 |
| NATURE OF INTEREST Ownership/Deed of Trust Ensement Other Leasehold. Ye., remaining Other IF RENTAL PROPERTY, GROSS INCOME RECEIVED So - \$499. | S100,001 - \$1,000,000 ACQUIRED DISPUSED | S100,001 - \$1,000,000 ACQUIRED DISPOSED |
| ConversitionDeed of Trust | | NATIRE OF INTEREST |
| FRENTAL PROPERTY, GROSS INCOME RECEIVED | | |
| FRENTAL PROPERTY, GROSS INCOME RECEIVED IF RENTAL PROPERTY, GROSS INCOME RECEIVED So. \$499. \$500\$1,000 \$1,001\$10,000 \$10,001.510,000 \$10,0 | - I secondal | Leasehold] |
| 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. SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more. You are not required to report loans from commercial lending institutions made in the lender's regular course of 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) HIGHEST BALANCE DURING REPORTING PERIOD 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. 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. SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more. You are not required to report loans from commercial lending institutions made in the lender's regular course of income of \$10,000 or more. NAME OF LENDER* NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM, (Months/Years) HIGHEST BALANCE DURING REPORTING PERIOD SOURCES OF RENTAL INCOME: \$10,000 or over \$1,001 - \$10,000 or over \$1,000 o | Yrs. remaining Other | Yrs. remaining Other |
| 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. SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more. You are not required to report loans from commercial lending institutions made in the lender's regular course of 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) HIGHEST BALANCE DURING REPORTING PERIOD 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. 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. SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more. You are not required to report loans from commercial lending institutions made in the lender's regular course of income of \$10,000 or more. NAME OF LENDER* NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM, (Months/Years) HIGHEST BALANCE DURING REPORTING PERIOD SOURCES OF RENTAL INCOME: \$10,000 or over \$1,001 - \$10,000 or over \$1,000 o | IE DENTAL PROPERTY GROSS INCOME RECEIVED | IF RENTAL PROPERTY, GROSS INCOME RECEIVED |
| \$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. Your are not required to report loans from commercial lending institutions made in the lender's regular course of income at \$10,000 or more. Your 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* NAME OF LENDER* | | |
| Interest, list the name of each tenant that is a single source of income of \$10,000 or more. Your 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) HIGHEST BALANCE DURING REPORTING PERIOD Stop -\$1,000 | | |
| Your 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 BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) HIGHEST BALANCE DURING REPORTING PERIOD \$10,001 - \$100,000 \$1,001 - \$10,000 \$10,001 - \$100,000 \$1,001 - \$10,000 Guarantor, if applicable TO CHE ADDRESS (Business Address Acceptable) TO GUARANTO CONTING REPORTING PERIOD Guarantor, if applicable FPC Form 700 (2011/2012) Sob | interest, list the name of each tenant that is a single source of | interest, list the name of each tenant that is a single source 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 BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) INTEREST RATE TERM (Months/Years) HIGHEST BALANCE DURING REPORTING PERIOD SEOU - \$1,000 | architic of distroyo of thoras | |
| 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 BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE IERM (Months/Years) HIGHEST BALANCE DURING REPORTING PERIOD SE00 - \$1,000 | | |
| 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 BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE IERM (Months/Years) INTEREST RATE IERM (Months/Years) HIGHEST BALANCE DURING REPORTING PERIOD SE00 - \$1,000 | | |
| 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 BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) INTEREST RATE TERM (Months/Years) HIGHEST BALANCE DURING REPORTING PERIOD SE00 - \$1,000 | | |
| ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE INTEREST RATE INTEREST RATE INTEREST BALANCE DURING REPORTING PERIOD HIGHEST BALANCE DURING REPORTING PERIOD SEQUENCE STOODS SEQUENCE STOODS Guarantor, if applicable CUTTENT YOUNG AND INTEREST CONTROL OF STOODS Guarantor, if applicable FOR ALT TO AND INTEREST CONTROL OF STOODS GUARANCE DURING REPORTING PERIOD GUARANCE DURING REPORTING PERIOD SEQUENCE STOODS GUARANCE DURING REPORTING PERIOD GUARANCE TO AND INTEREST CONTROL OF STOODS CONTROL OF STOODS FPPC Form 700 (2011/2012) Sch. | business on terms available to members of the public wi | thout regard to your official status. Personal loans and |
| BUSINESS ACTIVITY, IF ANY, OF LENDER BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) INTEREST RATE TERM (Months/Years) HIGHEST BALANCE DURING REPORTING PERIOD HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 | business on terms available to members of the public will loans received not in a lender's regular course of busine | ithout regard to your official status. Personal loans and ss must be disclosed as follows: |
| INTEREST RATE TERM (Months/Years) INTEREST RATE TERM (Months/Years) Whone Whone HIGHEST BALANCE DURING REPORTING PERIOD HIGHEST BALANCE DURING REPORTING PERIOD SECON—\$1,000 Sti,001—\$10,000 Sti,001—\$10,000 SECON—\$1,000 STO,000 STO,000 STO,000 STO,000 Guarantor, if applicable TERM (Months/Years) HIGHEST BALANCE DURING REPORTING PERIOD SECON—\$1,000 STO,000 STO,0 | business on terms available to members of the public will loans received not in a lender's regular course of busine | ithout regard to your official status. Personal loans and ss must be disclosed as follows: |
| # None # | business on terms available to members of the public will loans received not in a lender's regular course of busine NAME OF LENDER* | Thout regard to your official status. Personal loans and iss must be disclosed as follows: NAME OF LENDER! |
| # None | business on terms available to members of the public will loans received not in a lender's regular course of busine NAME OF LENDER* ADDRESS (Business Address Acceptable) | ithout regard to your official status. Personal loans and ses must be disclosed as follows: NAME OF LENDER.* ADDRESS (Business Address Acceptable) |
| HIGHEST BALANCE DURING REPORTING PERIOD HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 | business on terms available to members of the public will loans received not in a lender's regular course of busine NAME OF LENDER* ADDRESS (Business Address Acceptable) | ithout regard to your official status. Personal loans and ses must be disclosed as follows: NAME OF L'ENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF L'ENDER* |
| \$500 - \$1,000 \$1,001 - \$10,000 \$500 \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 | business on terms available to members of the public will loans received not in a lender's regular course of busine name of Lender* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY: OF LENDER | ithout regard to your official status. Personal loans and iss must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER* INTEREST RATE TERM (Months/Years) |
| \$500 - \$1,000 | business on terms available to members of the public will loans received not in a lender's regular course of busine name of Lender* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY: OF LENDER INTEREST RAFE TERM (Months/Years) | ithout regard to your official status. Personal loans and iss must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER* INTEREST RATE TERM (Months/Years) |
| St0,001 - \$100,000 OVER \$100,000 OVER \$100,000 Guarantor, if applicable Guarantor, if applicable Current youn - And interest ominients: IN Road Property in S.F. or P. Se where we sub- | business on terms available to members of the public will loans received not in a lender's regular course of busine NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY; OF LENDER INTEREST RAFE Mone | ithout regard to your official status. Personal loans and ses must be disclosed as follows: NAME OF L'ENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER* INTEREST RATE TERM (Months/Years) |
| Guarantor, if applicable Guarantor, if applicable Guarantor, if applicable | business on terms available to members of the public will loans received not in a lender's regular course of busine name of Lender* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) HIGHEST BALANCE DURING REPORTING PERIOD | ithout regard to your official status. Personal loans and iss must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) |
| That applicable - we do not currently own An interest omments: IN ROAL Property in S.F. or elsewhere. We SHO FPPC Form 700 (2011/2012) Sch | business on terms available to members of the public will loans received not in a lender's regular course of busine name of Lender* NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 | THOUT regard to your official status. Personal loans and ses must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER* INTEREST RATE TERM (Months/Years) |
| omments: IN ROAL Property IN S.F. or elsewhere. We SILD FPPC Form 700 (2011/2012) Sch. | business on terms available to members of the public will loans received not in a lender's regular course of busine name of Lender* NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 | THOUT regard to your official status. Personal loans and ses must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER* INTEREST RATE TERM (Months/Years) |
| FPPC Form 700 (2011/2012) Sch. | business on terms available to members of the public will loans received not in a lender's regular course of busine NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY: OF LENDER INTEREST RATE TERM (Months/Years) HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$10,001 - \$100,000 OVER \$100,000 | THOUT regard to your official status. Personal loans and ses must be disclosed as follows: NAME OF LENDER! ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER! INTEREST RATE TERM (Months/Years) |
| FPPC loit-rise neighins, oboi275-3222 www.inpucsa.y | business on terms available to members of the public will loans received not in a lender's regular course of busine NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$10,001 - \$100,000 Guarantor, if applicable | ithout regard to your official status. Personal loans and ses 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 |
| | business on terms available to members of the public will loans received not in a lender's regular course of busine NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$10,001 - \$100,000 Guarantor, if applicable A NACL ADVICEMME Ominients: (N. Report Y. CAMPA - W. D. N.) Ominients: Ominients: Ominients: Ominients: One of the public will be a publicable of the public will be a p | THOUT regard to your official status. Personal loans and iss must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER* INTEREST RATE TERM (Months/Years) HIGHEST BALANCE DURING REPORTING PERIOD. \$1,001 - \$10,000 \$1,000 \$10,000 Guarantor, if applicable CURRATY GOLD AND INTEREST FPPC Form 700 (2011/2012) Sch. |

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

| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
|---|
| Name |
| Daniel Hershkowitz |

| 1. INCOME RECEIVED | ▶ 1. INCOME RECEIVED |
|--|--|
| NAME OF SOURCE*OF INCOME | NAME OF SOURCE OF INCOME |
| Daniel Hershköwitz - Realtor / Lawyer / Expert | Alyssa Hershkowitz |
| ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| Independent Contractor | YMCA of San Francisco / Koi Fitness San Francisco |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| | Personal Training & Fitness Services |
| YOUR BUSINESS POSITION | YOUR: BUŞINESS POSITION. |
| Real Estate Agent / Lawyer / Expert Witness | Personal Trainer (filmess coach) |
| GROSS INCOME RECEIVED | GROSS INCOME RECEIVED |
| \$500:- \$1,000\$1,001 - \$10,000 | [] \$500 - \$1,000 [] \$1,001 - \$10,000 |
| ☐ \$10,001 - \$100,000 🔀 OVER \$100,000 | ▼ \$10,001 - \$100,000 |
| CONSIDERATION FOR WHICH INCOME WAS RECEIVED | CONSIDERATION FOR WHICH INCOME WAS RECEIVED |
| Salary Spouse's or registered domestic partner's income | Salary Spouse's or registered domestic partner's income |
| Loan repayment Partnership | ☐ Loan, repayment ☐ Partnership |
| Sale of | Sale of |
| (Real property; car, boat, etc.) | (Fieal property, car, boat, etc.) |
| Commission or Rental Fincome, list each source of \$10,000 or more | Commission or Rental Income, list each source of \$16,008 or more |
| Independent Contractor Wages & Fees | |
| ⊠ other Independent Contractor Wages & Fees | 📈 Other Independent Contractor Wages & Fees |
| (Desaţioe) | (Describe) |
| | |
| 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIO You are not required to report loans from commercial len | |
| | nding institutions, or any indebtedness created as part of a ender's regular course of business on terms available to us. Personal loans and loans received not in a lender's |
| * You are not required to report loans from commercial len retail installment or credit card transaction, made in the members of the public without regard to your official state. | nding institutions, or any indebtedness created as part of a ender's regular course of business on terms available to us. Personal loans and loans received not in a lender's |
| * You are not required to report loans from commercial len retail installment or credit card transaction, made in the lemembers of the public without regard to your official state regular course of business must be disclosed as follows: NAME OF LENDER*: | nding institutions, or any indebtedness created as part of a ender's regular course of business on terms available to us. Personal loans and loans received not in a lender's |
| * You are not required to report loans from commercial len retail installment or credit card transaction, made in the members of the public without regard to your official stat regular course of business must be disclosed as follows: | Inding institutions, or any indebtedness created as part of a ender's regular course of business on terms available to us. Personal loans and loans received not in a lender's IMTEREST RATE TERM (Months/Years) |
| * You are not required to report loans from commercial len retail installment or credit card transaction, made in the lemembers of the public without regard to your official state regular course of business must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable). | Iding institutions, or any indebtedness created as part of a ender's regular course of business on terms available to us. Personal loans and loans received not in a lender's IMTEREST RATE TERM (Months/Years) |
| * You are not required to report loans from commercial len retail installment or credit card transaction, made in the lemembers of the public without regard to your official state regular course of business must be disclosed as follows: NAME OF LENDER*: | Inding institutions, or any indebtedness created as part of a ender's regular course of business on terms available to us. Personal loans and loans received not in a lender's IMTEREST RATE TERM (Months/Years) |
| * You are not required to report loans from commercial len retail installment or credit card transaction, made in the lemembers of the public without regard to your official state regular course of business must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable). | Inding institutions, or any indebtedness created as part of a ender's regular course of business on terms available to us. Personal loans and loans received not in a lender's INTEREST RATE TERM (Months/Years) |
| * You are not required to report loans from commercial len retail installment or credit card transaction, made in the lemembers of the public without regard to your efficial state 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 | Inding institutions, or any indebtedness created as part of a ender's regular course of business on terms available to us. Personal loans and loans received not in a lender's INTEREST RATE TERM (Months/Years) |
| * You are not required to report loans from commercial len retail installment or credit card transaction, made in the lemembers of the public without regard to your official state regular course of business must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable). BUSINESS ACTIVITY, IF ANY, OF LENDER | Inding institutions, or any indebtedness created as part of a ender's regular course of business on terms available to us. Personal loans and loans received not in a lender's INTEREST RATE TERM (Months/Years) |
| * You are not required to report loans from commercial len retail installment or credit card transaction, made in the lemembers of the public without regard to your efficial state 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 | Inding institutions, or any indebtedness created as part of a ender's regular course of business on terms available to us. Personal loans and loans received not in a lender's INTEREST RATE TERM (Months/Years) |
| * You are not required to report loans from commercial len retail installment or credit card transaction, made in the lemembers of the public without regard to your official state 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. | Inding institutions, or any indebtedness created as part of a ender's regular course of business on terms available to us. Personal loans and loans received not in a lender's INTEREST RATE TERM (Months/Years) |
| * You are not required to report loans from commercial len retail installment or credit card transaction, made in the lemembers of the public without regard to your efficial state 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 | Inding institutions, or any indebtedness created as part of a ender's regular course of business on terms available to us. Personal loans and loans received not in a lender's INTEREST RATE TERM (Months/Years) |
| * You are not required to report loans from commercial len retail installment or credit card transaction, made in the lemembers of the public without regard to your efficial state 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 \$10,001 - \$100,000 | Inding institutions, or any indebtedness created as part of a ender's regular course of business on terms available to us. Personal loans and loans received not in a lender's IMEREST RATE TERM (Months/Years) SECURITY FOR LOAN None Personal residence Real Property Street address City |
| * You are not required to report loans from commercial len retail installment or credit card transaction, made in the lemembers of the public without regard to your efficial state 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 \$10,001 - \$100,000 | Inding institutions, or any indebtedness created as part of a ender's regular course of business on terms available to us. Personal loans and loans received not in a lender's INTEREST RATE TERM (Months/Years) |
| * You are not required to report loans from commercial len retail installment or credit card transaction, made in the lemembers of the public without regard to your efficial state 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 \$10,001 - \$100,000 | Inding institutions, or any indebtedness created as part of a ender's regular course of business on terms available to us. Personal loans and loans received not in a lender's INTEREST RATE TERM (Months/Years) |
| * You are not required to report loans from commercial len retail installment or credit card transaction, made in the lemembers of the public without regard to your official state 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 \$10,001 - \$100,000 OVER \$100,000 | Inding institutions, or any indebtedness created as part of a ender's regular course of business on terms available to us. Personal loans and loans received not in a lender's INTEREST RATE TERM (Months/Years) |
| * You are not required to report loans from commercial len retail installment or credit card transaction, made in the lemembers of the public without regard to your official state 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 \$10,001 - \$100,000 OVER \$100,000 | Inding institutions, or any indebtedness created as part of a ender's regular course of business on terms available to us. Personal loans and loans received not in a lender's INTEREST RATE TERM (Months/Years) |
| * You are not required to report loans from commercial len retail installment or credit card transaction, made in the lemembers of the public without regard to your official state 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 \$10,001 - \$100,000 OVER \$100,000 | Inding institutions, or any indebtedness created as part of a ender's regular course of business on terms available to us. Personal loans and loans received not in a lender's INTEREST RATE TERM (Months/Years) |

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



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

| 2 Live this salated Application to the Clark of the Board of Supervisors |
|---|
| Complete and return this original Application to the Clerk of the Board of Supervisors Application for Appointment to: Board 1 or Board 1 alternate (Please circle one) Board 2 or Board 2 alternate |
| 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 unless refund to make publication. |
| Name: Joyce Lewis Home Address: |
| City: San Francisco State: CA Zip code: 94/22 |
| Business Address: 4/50 Clement St. City: San Francis State: CA Zip Code: 94121 |
| Home Phone (415) Work Phone: (415) 150 - 2288 Fax #: 114 |
| Pager #: n/A E-Mail Address: X4662 50 gmail |
| Are you a United States citizen, or a resident alien who is eligible for and has applied for citizenship? Yes \(\subseteq \text{No} \) |
| Have you ever been convicted of a felony in this state, or convicted of any offense which, if committed in this state, would be a felony? Yes No (If yes, please attach a statement describing the offense(s) for which you have been convicted, the date of the conviction(s), and the court(s) that convicted you.) |
| Pursuant to Ordinance No. 393-98 the following qualifications are required: A person shall not be eligible for nomination for membership on an assessment appeals board unless he or she has a minimum of five years' professional experience in this state as one of the following: certified public accountant or public accountant, licensed real estate broker, attorney, or property appraiser accredited by a nationally recognized professional organization, or property appraiser certified by either the Office of Real Estate Appraiser or by the State Board of Equalization. Documentation of qualifying experience must be submitted with this application form. This requirement does not apply to incumbent board members nominated for appointment to their same seats. |
| Please state your qualifications: Hensed attorney State of California BAR# 163342 |
| Please state your business and/or professional experience: In cumbert Commissional / Hearing Officer for Bo # 2; government attorney for 15+ years |
| Occupation: Federal govern ment after new Education: Turis Doctor ate Santa Clara |
| Civic Activities: Preserry I serve as Commissioner Theoring |
| Ethnicity (optional): Sex (optional): M F |
| Other Personal Information (optional) |
| Would you be able to attend Day Meetings? |
| Appearance before the RULES COMMITTEE is a requirement before any appointment can be made. Please Note: Your application will be retained for one year. |

Applicant's Signature

For Office Use Only: Appointed to Board #:

Seat #:

Term Expires:

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

R 30 PM 5: 05 COVER PAGE SAN FRANCISCO

Date Received

| Please type or print in lnk. | ንበኒሳ አ ኔቲና ኋ ለ ነንህ ሳ- ሲስ |
|---|---|
| NAME OF FILER SA MASK ANCISCO: LETHICS COMMISSION JOYC | (FIRST) (MIDDLE) |
| 1. Office, Agency, or Gourt | |
| Division, Board Department, District, if applicable () | Cancisco Comissioner Board Atternate Provid Mu |
| ► If filling for multiple positions, list below or on an attachment. | source 13/10/10/10 pero 110 |
| Firming for multiple positions, as below of on all attachment. | |
| Agency: | Position: |
| Jurisdiction of Office (Check at least one box) | |
| State | ☐ Judge or Court Commissioner (Statewide Jurisdiction) |
| . — Multi-County | Geounty of San Francisco |
| City of | Other |
| | |
| 3. Type of Statement (Check at least one box) | |
| Annual: The period covered is January 1, 2011, through December 31, 2011. | Leaving Office: Date Left |
| The period covered is/, through December 31, 2011. | The period covered is January 1, 2011, through the date of leaving office. |
| Assuming Office: Date assumed | O The period covered is/ through the date of leaving office. |
| Candidate: Election Year Office sought, if dif | forent than Part 1: |
| 4. Schedule Summary Check applicable schedules or "None." ► Total | number of pages including this cover page: |
| □ Schedule A-1 - Investments schedule attached □ Schedule 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 intere | ests on any schedule |
| 5. Verification | San Formula CA CIUS |
| MAILING ADDRESS STREET CITY (Business or Agency Address Recommended - Public Document) | STATE ZIP CODE |
| DAYTIME TELEPHONE NUMBER | E-MAIL ADDRESS (OPTIONAL) |
| | - The second of the second |
| I have used all reasonable diligence in preparing this statement. I have reviewherein and in any attached schedules is true and complete. I acknowledge | wed this statement and to the best of my knowledge the information contained this is a public document. |
| I certify under penalty of perjury under the laws of the State of Californ | |
| 3/10/2012 | ignature $3/28/2076$ |

FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

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

For Office Use Only: Appointed to Board #:



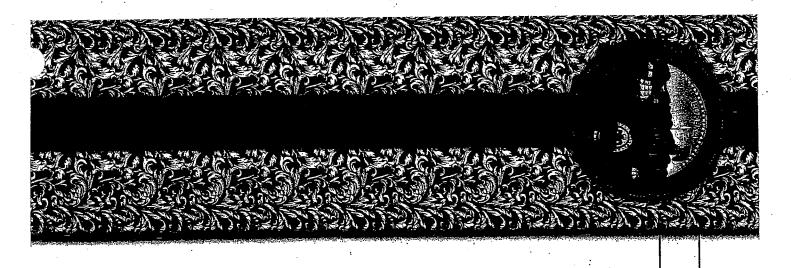
City Hall, Room 244 1 Dr. Carlton B. Goodlett Place

Term Expires:

San Francisco, CA 94102-4697

| Complete and return this original Application to the Clerk of the Board of Supervisors |
|---|
| Application for Appointment to: Board 1 or Board 1 alternate (Please circle one) Board 2 or Board 2 alternate Assessment Appeals Board |
| 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? A vas no no Mallorca Way |
| Name: 1 1 ava 3 |
| City: San Francisco State: CA Zip code: 94123 Business Address: 263 Mallorca Way City San Francisco State: CA Zip Code: 94123 |
| |
| |
| Pager #: E-Mail Address: @ realworksreo. Com |
| Are you a United States citizen, or a resident alien who is eligible for and has applied for citizenship? X Yes \(\subseteq \ 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: |
| Pursuant to Ordinance No. 393-90 the following quainfoldering the following of the following of the following of the following has a minimum of five years' professional experience in this state as one of the following: certified public accountant or public accountant, licensed real estate broker, attorney, or property appraiser accredited by a nationally recognized professional organization, or property appraiser certified by either the Office of Real Estate Appraiser or by the State Board of Equalization. Documentation of qualifying experience must be submitted with this application form. This requirement does not apply to incumbent board members nominated for appointment to their same seats. Please state your qualifications: A CA * Please See Tesume attacks. |
| Please state your business and/or professional experience: Owner Broker of a real esta company. CA Broker Ticense Since 2006. Occupation: Real Estate Broker Education: Undergraduate degree |
| Civic Activities: IN DUSINESS |
| Ethnicity (optional): Caucasian Sex (optional): M XF |
| Other Personal Information (optional) Avid runner, love travels to Equality Supporter |
| Would you be able to attend Day Meetings? |
| Appearance before the RULES COMMITTEE is a requirement before any appointment can be made. Please Note: Your application will be retained for one year. |
| Annilleant's Signature: |

446 Seat #:



STATE OF CALIFORNIA

Department of Real Estate

Serving Californians Since 1917

Real Estate Broker License

Diana Lee Daniel

MAIN OFFICE ADDRESS 6024 JOHNSTON DRIVE OAKLAND; CA 94611

• REALWORKS RESIDENTIAL

Real Estate Commissioner

Identification Number: 01212835 Issued: March 17, 2010 Expires: March 16, 2014

447

TATE OF CALIFORNIA DEPARTMENT OF REAL ESTATE

The license information shown below represents public information taken from the Department of Real Estate's database at the time of your inquiry. It will not reflect pending changes which are being reviewed for subsequent database updating. Also, the license information provided includes formal administrative actions that have been taken against licensees pursuant to the Business and Professions Code and/or the Administrative Procedure Ac All of the information displayed is public information. Although the business and mailing addresses of real estate licensees are included, this information is not intended for mass mailing purposes.

License information taken from records of the Department of Real Estate on 10/18/2012 12:04:23 PM

License Type:

BROKER

Name:

Daniel, Diana Lee

Mailing Address:

MALLORCA WAY

SAN FRANCISCO, CA 94123

License ID:

01212835

Expiration Date:

03/16/14

License Status:

LICENSED

Salesperson License Issued:

08/30/96 (Unofficial -- taken from secondary records)

Broker License Issued:

03/17/06

Former Name(s):

NO FORMER NAMES

Main Office:

6024 JOHNSTON DRIVE OAKLAND, CA 94611

DBA

RealWorks Residential

ACTIVE AS OF 03/23/2007

Branches:

263 MALLORCA WAY

SAN FRANCISCO, CA 94123

Affiliated Licensed Corporation(s): NO CURRENT AFFILIATED CORPORATIONS

Comment:

NO DISCIPLINARY ACTION

NO OTHER PUBLIC COMMENTS

>>>> Public information request complete <<<<

Diana Daniel

RealWorks Residential 510-922-9026(O); 510-922-9029(Fax) diana@realworksreo.com

I have worked in the field of real estate since 1988. I was first licensed in the State of Maine as a real estate salesperson. I moved to California in 1992 and obtained my real estate license in 1996. I then received my Broker license in 2006. Since my time in California I have specifically marketed and sold REO (Bank Owned Property). I worked for 10 years with one of the largest firms that markets bank owned properties in the Bay Area. I briefly moved to Massachusetts for 3 years from 2003-2006 and also obtained my real estate license in that state. I moved back to California in 2006 and returned to my previous employer for two years and then started my own real estate firm in 2007. Since that time I have run my own real estate firm marketing strictly to banking institutions and marketing and selling REO properties. In 2011 I sold 68 REO properties. I have extensive knowledge in the valuation and marketing of REO (bank owned) properties and residential real estate. In the past 20 years I have completed hundreds of Broker Price Opinions. The climate for REO property has changed and inventory has decreased. Due to the downturn in business I have decided to look at other opportunities in the real estate field.

Education:

1971-1979 - Cony High School 1979-1983 - BA in Business - University of Maine 1988 - Maine licensed real estate salesperson 2006 - California licensed real estate salesperson 2004-2006 - Massachusetts licensed real estate salesperson 2006 - California Broker License

Affiliations:

National Association of Realtors
California Association of Realtors
Oakland Association of Realtors
San Francisco Association of Realtors

EBRDI – East Bay Regional Data – MLS

BAREIS-Bay Area Real Estate Information Services – MLS

The above also include San Francisco and Santa Clara Multiple Listing Services

Employment:

1992-2003 - Equity Capital Real Estate - Alameda, California
Assistant to the owner of the company and manager of REO operations.

2003-2006 - Sawicki Real Estate - Amherst, Massachusetts Licensed real estate salesperson

2006-2008 - Equity Capital Real Estate - Alameda, California Manager of REO operations

2007-Present - RealWorks Residential

Broker/President/Owner of a real estate company specializing in the marketing and sale of REO (Bank Owned) Property.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

Date Received Official Use Only

A PUBLIC DOCUMENT

COVER PAGE

Please type or print in link

| NA | IE OF FILER (LAST) | | (FIRST) | ······································ | (MIDDLE) |
|----------------|--|---------------------------------------|--|--|---------------------------------------|
| D | aniel | Diana | () | | Lee |
| 1. | Office, Agency, or Court | | · · · · · · · · · · · · · · · · · · · | | |
| | Agency Name | | | | TW . |
| | Assessment Appeals Board - Board - 2 Alternate | + Brin | 1: 88 Sunan | MISMS | GO CO |
| | Division, Board, Department, District, if applicable | | Your Position | · VICA N. J | |
| | Assessment Appeals Board-City & County of Sa | an Francisco | Board 2 Alterr | nate | |
| | ▶ If filing for multiple positions, list below or on an attachment. | • | | | |
| | Agency: | • | Position; | • | • |
| | 3, | | Position, | | |
| 2. | Jurisdiction of Office (Check at least one box) | | | | |
| İ | State | | ☐ Judge or Court Co | ommissioner (State | ewide Jurisdiction) |
| . 1 | Multi-County | | ⊠ County of San F | rancisco | · · · · · · · · · · · · · · · · · · · |
| Ī | X City of San Francisco | | Other | · | · |
| | | | | | · · · · · · · · · · · · · · · · · · · |
| у. Г | Type of Statement (Check at least one box) Annual: The period covered is January 1, 2011, through | | III tourismonto | | |
| 1 | December 31, 2011. | | (Check one) | Date Left/_ | |
| | -or- The period covered is/ | _ through | | vered is January 1 | , 2011, through the date of |
| | December 31, 2011. | | leaving office. | | |
| L | Assuming Office: Date assumed/ | <u> </u> | O The period cov the date of lea | vered is/_ ving office. | |
| D | Candidate: Election Year 2012 Office s | aught if different | than Part 1: | , | |
| | | oughly in ontwork | unar ult i. | | |
| | Schedule Summary | . Takal | | | 7 |
| _ | heck applicable schedules or "None." | ► Iotal nun | nder of pages incl | luding this col | ver page:7 |
| <u>></u> | Schedule A-1 - Investments – schedule attached Schedule A-2 - Investments – schedule attached | | | | Positions - schedule attached |
| <u> </u> | Schedule B - Real Property - schedule attached | | chedule D - Income - | | |
| _ | -or | | chequie E • Income - | Gits – Travel Payl | ments - schedule attached |
| | ☐ None - <i>No repo</i> r | | n any schedule | | |
| Ve | erification | | | | |
| M | MLING ADDRESS STREET or Agency Address Recommended - Public Document) | CITY | | STATE | ZIP CODE |
| | Mallorca Way | San Francis | 3CO | CA | 94123 |
| ut , | VIIME TELEPHONE NUMBER | 1 | L ADDRESS (OPTIONAL) | · | |
| (| 510 | dia | na@realworksrec | .com | |
| he | ave used an reasonable diligence in preparing this statement. I rein and in any attached schedules is true and complete. I act | nave reviewed th knowledge this is | a public document. | pest of my knowle | edge the information contained |
| i | ertify under penalty of perjury under the laws of the State | of California tha | t the foregoing is true | and correct. | |
| _ | 11/28/12 | | \(\frac{1}{4} \) | 14 | |
| Da | te Signed (mchit, day, year) | Signatu | | nally eigned sufficient wil | th your Ming official.) |
| | | | | | |

FPPC Form 700 (2011/2012) 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 |
| Diana Lee Daniel |
| |

| NAME OF BUSINESS ENTITY | NAME OF PURPLES |
|---|--|
| Charles Schwab - SEP/IRA | ► NAME OF BUSINESS ENTITY |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
| Retirement account | SAL SESSIAL HON OF BUSINESS ACTIVITY |
| FAIR MARKET VALUE | |
| \$2,000 - \$10,000 \$10,001 - \$100,000 | FAIR MARKET VALUE |
| ⊠ \$100,001 - \$1,000,000 ☐ Over \$1,000,000 | \$2,000 - \$10,000 |
| NATURE OF INVESTMENT Stock Other Retirement Account | NATURE OF INVESTMENT |
| (Describe) Partnership O Income Received of \$0 - \$499 | Stock Other(Describe) |
| Income Received of \$500 or More (Report on Schedule C) | Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: |
| | |
| ACQUIRED DISPOSED | / |
| NAME OF BUSINESS ENTITY | NAME OF BUSINESS ENTITY |
| | |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
| | |
| FAIR MARKET VALUE | FAIR MARKET VALUE |
| \$2,000 - \$10,000 \$10,001 - \$100,000 | |
| S100,001 - \$1,000,000 Over \$1,000,000 | \$2,000 - \$10,000 \$10,000 - \$100,000 Over \$1,000,000 |
| NATURE OF INVESTMENT | |
| Stack Other | NATURE OF INVESTMENT Stock Dither |
| (Describe) Partnership O Income Received of \$0 - \$499 | (Decribo) |
| O Income Received of \$500 or More (Report on Schedule C) | Partnership O Income Received of \$0 - \$400 |
| , | O Income Received of \$500 or More (Report on Schedule C) |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: |
| | 4.4 |
| ACQUIRED DISPOSED | // 11// 11 ACQUIRED DISPOSED |
| NAME OF BUSINESS ENTITY | ► NAME OF BUSINESS ENTITY |
| | LAMIT OF DOSINESS ENTITY |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
| | |
| FAIR MARKET VALUE | |
| \$2,000 - \$10,000 | FAIR MARKET VALUE |
| \$100,001 - \$1,000,000 Over \$1,000,000 | \$2,000 - \$10,000 |
| 11 | S100,001 - \$1,000,000 Over \$1,000,000 |
| NATURE OF INVESTMENT | NATURE OF INVESTMENT |
| Stock Other (Describe) | Stock Other |
| Partnership O Income Received of \$0 - \$499 | (Describe) Partnership O Income Received of \$0 - \$499 |
| O Income Received of \$500 or More (Report on Schedule C) | O income Received of \$500 or More (Report on Schedule C) |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: |
| | |
| ACQUIRED DISPOSED | ACQUIRED DISPOSED |
| H. | ACQUIRED DISPOSED |
| Comments: | |

FPPC Form 700 (2011/2012) Sch. A-1 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 | |
|------------------|--|
| Name | |
| Diana Lee Daniel | |

| ► 1. BUSINESS ENTITY OR TRUST | ▶ 1. BUSINESS ENTITY OR TRUST |
|--|---|
| RealWorks Residential | |
| Name 263 Mallorca Way San Francisco, CA 94123 Address (Business Address Acceptable) Check one Trust, go to 2 Business Entity, complete the box, then go to 2 | 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 agency | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
| FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 | FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED DISPOSED \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT |
| Sole Proprietorship Partnership Other YOUR BUSINESS POSITION President/Owner/Broker | Sole Proprietorship Partnership Other YOUR BUSINESS POSITION |
| | |
| 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) | 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 ☐ \$10,000 ☐ \$1,001 - \$10,000 | ☐ \$0 - \$499 ☐ \$10,001 - \$100,000 ☐ \$500 - \$1,000 ☐ OVER \$100,000 |
| ➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$19,000 OR MORE (Atlant) a separate sheet if necessary.) | ➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach it separate sheet if necessary.) |
| Commissions from the sale of real estate in San Francisco, Alameda, Contra Costa and Solano counties. | |
| ► 4. Investments and interests in real property held <u>by</u> the - Business entity or trust | ► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR-TRUST |
| Check one box: INVESTMENT REAL PROPERTY | Check one box: INVESTMENT REAL PROPERTY |
| Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of 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 | Description of Business Activity <u>or</u> City or Other Precise Location of Real Property |
| FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$100,000 | FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 |
| NATURE OF INTEREST . Properly Ownership/Deed of Trust Stock Partnership . | NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership |
| Leasehold Other | Leasehold Other |
| Yrs. remaining Check box if additional schedules reporting investments or real property are attached | Yrs. remaining Check box if additional schedules reporting investments or real property are attached |
| Comments: | EPPC Form 700 (2011/2012) Sch. A-2 |

FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION Name Diana Lee Daniel

| ➤ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS 263 Mallorca Way | ► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS |
|---|---|
| CITY San Francisco, CA 94123 | CITY |
| FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 ACQUIRED DISPOSED NATURE OF INTEREST Ownership/Deed of Trust IF APPLICABLE, LIST DATE: ACQUIRED DISPOSED | FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 111 11 11 11 11 11 11 11 11 |
| Connership/Deed of Trust Easement | Ownership/Deed of Trust Easement Leasehold |
| 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. | FRENTAL PROPERTY, GROSS INCOME RECEIVED \$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000 SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more. |
| You are not required to report loans from commercial let business on terms available to members of the public w. loans received not in a lender's regular course of business. | nding institutions made in the lender's regular course of |
| loans received not in a lender's regular course of busine | ess must be disclosed as follows: |
| NAME OF LENDER* | NAME OF LENDER* |
| ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| BUSINESS ACTIVITY, IF ANY, OF LENDER | BUSINESS ACTIVITY, IF ANY, OF LENDER |
| INTEREST RATE TERM (Months/Years) | INTEREST RATE TERM (Months/Years)% |
| HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000 Guarantor, if applicable | HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 |
| mments: | |

FPPC Form 700 (2011/2012) Sch. B FPPC Toll-Free Heipline: 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 |
| Diana Lee Daniel |

| 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. INCOME RECEIVED | ► 1. INCOME RECEIVED |
|--|---|--|
| BUSINESS ACTIVITY, IF ANY, OF SOURCE YOUR BUSINESS POSITION GROSS INCOME RECEIVED \$500.51,000 | NAME OF SOURCE OF INCOME | |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE YOUR BUSINESS POSITION GROSS INCOME RECEIVED \$500.51,000 | ADDDECC (During and L | |
| YOUR BUSINESS POSITION Stool | ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| GROSS INCOME RECEIVED \$500 - \$1,000 | BUSINESS ACTIVITY, IF ANY, OF SOURCE | BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| \$500 - \$1,000 | YOUR BUSINESS POSITION | YOUR BUSINESS POSITION |
| \$500 - \$1,000 | | |
| \$500 - \$1,000 \$1,001 - \$10,000 \$1,00 | GROSS INCOME RECEIVED | GROSS INCOME RECEIVED |
| \$10,001 - \$100,000 OVER \$1 | \$500 - \$1,000 \$1,001 - \$10,000 | |
| Salary Spouse's or registered domestic partner's income Salary Spouse's or registered domestic partner's income Loan repayment Partnership Loan repayment Partnership Loan repayment Partnership Loan repayment Partnership Sale of Great property, car, boat, etc.) Commission or Rental Income, list sach source of \$10,000 or more Other Commission or Rental Income, list sach source of \$10,000 or more Other Commission or Rental Income, list sach source of \$10,000 or more Other Commission or Rental Income, list sach source of \$10,000 or more Other Commission or Rental Income, list sach source of \$10,000 or more Other Commission or Rental Income, list sach source of \$10,000 or more Other Commission or Rental Income, list sach source of \$10,000 or more Commission or Rental Income, list sach source of \$10,000 or more Commission or Rental Income, list sach source of \$10,000 or more Commission or Rental Income, list sach source of \$10,000 or more Commission or Rental Income, list sach source of \$10,000 or more Commission or Rental Income, list sach source of \$10,000 or more Commission or Rental Income, list sach source of \$10,000 or more Commission or Rental Income, list sach source of \$10,000 or more Commission or Rental Income, list sach source of \$10,000 or more Commission or Rental Income, list sach source of \$10,000 or more Commission or Rental Income, list sach source of \$10,000 or more Commission or Commissi | S10,001 - \$100,000 OVER \$100,000 | |
| Salary Spouse's or registered domestic partner's income Loan repayment Partnership Commission or Rental Income, itst such source of \$10,000 are noted Commission or Rental Income, itst such source of \$10,000 are noted Commission or Rental Income, itst such source of \$10,000 are noted Commission or Rental Income, itst such source of \$10,000 are noted Commission or Rental Income, itst such source of \$10,000 are noted Commission or Com | • | CONSIDERATION FOR WHICH INCOME WAS RECEIVED |
| Sale of Sale | Salary Spouse's or registered domestic partner's income | |
| Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or Commission or Rental Income, itst each source of \$10,000 or Commission or Rental Income, itst each source of \$10,000 or Commission or Rental Income, itst each source of \$10,000 or Commission or Rental Income, itst each source of \$10,000 or Commission or Rental Income, itst each source of \$10,000 or Commission or Rental Income, itst each source of \$10,000 or Commission or Rental Income, itst each source of \$10,000 or Commission or Rental Income, itst each source of \$10,000 or Commission or Rental Income, itst each source of \$10,000 or Commission or Rental Income, itst each source of \$10,000 or Commission or Commi | Loán repayment Partnership | Loan repayment Parinership |
| Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Rental Income, itst each source of \$10,000 or more Commission or Commission or Rental Income, itst each source of \$10,000 or more Commission or | Sale of | Sale of |
| Other | | (Real property, car, boat, etc.) |
| 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 retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows: NAME OF LENDER* INTEREST RATE TERM (Months/Years) SECURITY FOR LOAN PORRESS (Business Address Acceptable) SECURITY FOR LOAN None Real Property Street address INTEREST BALANCE DURING REPORTING PERIOD SITUATION OF City Street address Guarantor Guarantor Other Other (Describs) | Commission or Rental Income, its each source of \$10,000 or more | Commission or Rental Income, list each source of \$10,000 or more |
| 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 retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows: NAME OF LENDER* INTEREST RATE TERM (Months/Years) ADDRESS (Business Address Acceptable) SECURITY FOR LOAN None Real Property Street address HIGHEST BALANCE DURING REPORTING PERIOD \$1,001 - \$10,000 City \$1,001 - \$100,000 Other (Describe) | | |
| 2. LOANS RECEIVED OR DUTSTANDING DURING THE REPORTING PERIOD * You are not required to report loans from commercial lending institutions, or any indebtedness created as part of retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows: NAME OF LENDER* INTEREST RATE TERM (Months/Years) ADDRESS (Business Address Acceptable) SECURITY FOR LOAN SECURITY FOR LOAN None Real Property Street address HIGHEST BALANCE DURING REPORTING PERIOD \$1,000 \$1,000 Gustantor Other (Describe) | Other | Other |
| You are not required to report loans from commercial lending institutions, or any indebtedness created as part of retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows: NAME OF LENDER* INTEREST RATE TERM (Months/Years) ADDRESS (Business Address Acceptable) SECURITY FOR LOAN SUSINESS ACTIVITY, IF ANY, OF LENDER Real Property Street address HIGHEST BALANCE DURING REPORTING PERIOD \$1,001 - \$10,000 Guarantor OVER \$100,000 OUER \$100,000 | (Describe) | |
| You are not required to report loans from commercial lending institutions, or any indebtedness created as part of retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows: NAME OF LENDER* INTEREST RATE TERM (Months/Years) ADDRESS (Business Address Acceptable) SECURITY FOR LOAN SUSINESS ACTIVITY, IF ANY, OF LENDER Real Property Street address HIGHEST BALANCE DURING REPORTING PERIOD \$1,001 - \$10,000 Guarantor OVER \$100,000 OUER \$100,000 | | [] |
| ADDRESS (Business Address Acceptable) SECURITY FOR LOAN BUSINESS ACTIVITY, IF ANY, OF LENDER Mone Personal residence Real Property Street address City \$1,001 - \$10,000 OVER \$100,000 OVER \$100,000 City Other (Describe) | members of the public without regard to your official sta | e lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's |
| SECURITY FOR LOAN BUSINESS ACTIVITY, IF ANY, OF LENDER Real Property Street address | NAME OF LENDER* | INTEREST RATE TERM (Months/Years) |
| SECURITY FOR LOAN BUSINESS ACTIVITY, IF ANY, OF LENDER Real Property Street address | | % \[\text{None} |
| BUSINESS ACTIVITY, IF ANY, OF LENDER Real Property Street address Glay Guarantor OVER \$100,000 City Other (Describe) | ADDRESS (Business Address Acceptable) | |
| Real Property Street address \$500 - \$1,000 City \$1,001 - \$10,000 Guarantor OVER \$100,000 Other (Describe) | N. C. L. C. | |
| Street address Stre | BUSINESS ACTIVITY, IF ANY, OF LENDER | None Personal residence |
| \$500 - \$1,000 | JICLIEGT DALAMOT DUDING DEDOCTING DEDICO | |
| \$1,001 - \$10,000 Guatentor Other (Describe) | | |
| \$10,001 - \$100,000 Guarantor Guarantor Other (Describe) | - - | City |
| OVER \$100,000 (Describe) | | Guarantor |
| [_] Other(Describe) | | |
| | T 04517 \$100'000 | |
| | | (Vesante) |
| | · | |

FPPC Form 700 (2011/2012) Sch. C FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE D Income - Gifts

| NAME OF SOURCE | NAME OF SOURCE |
|--|---|
| | Think of Source |
| ADDRESS (Business Address Acceptable) | ADDRESS (During and Address of Ad |
| | ADDRESS (Business Address Acceptable) |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | DV6 |
| | BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| DATE (mm/dd/yy) VALUE DESCRIPTION OF GIET/S) | |
| DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) | DATE (πιπ/dd/yy) VALUE DESCRIPTION OF GIFT(S) |
| <u>\$</u> | |
| | \$ |
| | |
| | |
| | - [] - |
| | |
| NAME OF SOURCE | ► NAME OF SOURCE |
| | |
| ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| | |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| | ANT, OF BOURCE |
| DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) | DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) |
| | DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) |
| | |
| · · | |
| | \$ |
| | |
| \$ | |
| IAME OF SOURCE | |
| | NAME OF SOURCE |
| DDRESS (Business Address Acceptable) | |
| | ADDRESS (Business Address Acceptable) |
| USINESS ACTIVITY, IF ANY, OF SOURCE | |
| SOURCE SOURCE | BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| ATT (market) A Market | |
| ATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) | DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) |
| | |
| | \$ |
| | |
| | \$ |
| / / 5 | |
| | |
| | |
| | |
| mments: | |

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

| CALIFORNIA FORM FAIR POLITICAL PRACTICES C | |
|---|--|
| Name | |
| Diana Lee Daniel | |
| | |

- · 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. These payments are not subject to the \$420 gift limit, but may result in a disqualifying conflict of interest.

| ► NAME OF SOURCE | ► NAME OF SOURCE |
|---|---|
| ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| CITY AND STATE | CITY AND STATE |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3) | BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3 |
| DATE(S):/ AMT: S | DATE(S): |
| TYPE OF PAYMENT: (must check one) | TYPE OF PAYMENT: (must check one) Gift I income |
| Made a Speech/Participated in a Panel | Made a Speech/Participated in a Panel |
| Other - Provide Description | Other - Provide Description |
| | |
| | |
| NAME OF SOURCE | NAME OF SOURCE |
| ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| CITY AND STATE | CITY AND STATE |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3) | BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3) |
| DATE(S):/ | DATE(S): |
| TYPE OF PAYMENT: (must check one) Gift Income | TYPE OF PAYMENT: (must check one) Gift Income |
| Made a Speech/Participated in a Panel | Made a Speech/Participated in a Panel |
| Other - Provide Description | Other - Provide Description |
| | |
| | |
| Comments: | |
| · · · · · · · · · · · · · · · · · · · | |

FPPC Form 700 (2011/2012) Sch. E FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

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



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

| Complete and return this original Application to the Clerk of the Board of Supervisors |
|---|
| Application for Appointment to: Board 1 or Board 1 alternate (Please circle one) Board 2 or Board 2 alternate |
| Enter your name, mailing address and daytime telephone number in the spaces provided. Because this form is a document available for public review, you may list your business/office address, telephone number and e-mail address in lieu of your home address or other personal contact information. |
| Do you authorize release of your private/personal information? Name: Robia Crisp Home Address: — Collins Street |
| City: Van Francisco state: CA zip code: 94118 Manatt Phologram Business Address: 1 Embarcadeno Centor, 30th fl. San Francisco tate: CA zip code: 94111 |
| Home Phone (415) Work Phone: (415)291-7462 Fax #: |
| Pager #: E-Mail Address: @ manatt.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 the or she has a minimum of five years' professional experience in this state as one of the following: certified public accountant or public accountant, licensed real estate broker, attorney, or property appraiser accredited by a nationally recognized professional organization, or property appraiser certified by either the Office of Real Estate Appraiser or by the State Board of Equalization. Documentation of qualifying experience must be submitted with this application form. This requirement does not apply to incumbent board members nominated for appointment to their same seats. |
| Please state your qualifications: <u>Licensed member of the California State Bar</u> Since December 2003 (9 years) #227198. |
| Please state your business and/or professional experience: Land Use attorney in San Francisco. |
| Decupation: Attorney Education: B.A. UCDavis |
| civic Activities: Member Supporter of Golden Gate National Parks Conservancy |
| ithnicity (optional): Kovean American Sex (optional): M KF |
| other Personal Information (optional) See attached resume |
| Vould you be able to attend Day Meetings? Yes No Night meetings? Yes No No Night meetings? Yes No No Night meetings? 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. Applicant's Signature: Note curp |
| or Office Use Only: Appointed to Board #: Seat #: Term Expires: |

ROBIA SOOK CRIST

gmail.com@و_ Collins Street • San Francisco, CA 94118• (415)

BAR ADMISSION

California State Bar, December 2003

WORK EXPERIENCE

June 2012-

UPDATE LEGAL MANATT PHELPS AND PHILLIPS

San Francisco, CA

present

Contract Land Use Associate

Assist in the representation of a broad range of clients in land use matters. Regularly appear before local decisionmaking bodies throughout the Bay Area in connection with obtaining discretionary approvals.

June 2006-

MILLER STARR REGALIA

Walnut Creek, CA

June 2012

Land Use Associate

Represented clients in all phases of entitlement processing, including compliance with CEQA and regularly appearing before local governmental bodies throughout Northern California. Assisted in representation of national big box retailer and interfaced with staff and technical consultants to develop a comprehensive administrative record. Provided land use advice to a global healthcare company operating a large campus in the East Bay. Conducted land use due diligence research in connection with site acquisitions. Drafted contracts, deeds, easements, and other legal documents in connection with real estate transactions. Administrative law experience in obtaining alcoholic beverage sales permits on behalf of two national drugstore companies. Projects included handling two hearings before administrative law judges, both resulting in favorable decisions.

DOWNEY BRAND LLP

Sacramento, CA

Sept. 2006-June 2006; Summer

2002

Water Law Associate; Summer Associate

Assisted in representing public and private clients on a broad range of issues involving water law. Advised public agency clients regarding compliance issues under the Brown Act, Political Reform Act, and Public Records Act. Assisted in representing amicus curiae water association and prepared appellate brief on issue of priority of water rights, resulting in favorable decision in El Dorado Irrigation Dist. v. State Water Resources Control Bd. (2006) 142 Cal.App.4th 937. Represented private landowners in a water right dispute and drafted appellate briefs resulting in a favorable decision in Barnes v. Hussa (2006) 136 Cal.App.4th 1358.

EDUCATION

May 2003

University of the Pacific McGeorge School of Law

Juris Doctor, Graduated with Distinction

Dec. 1996

University of California, Davis

Bachelor of Arts, Philosophy

SELECTED PUBLICATIONS AND TEACHING EXPERIENCE

Editorial Board Member, Climate Change Reporter (August 2009-January 2011)

- Editorial Board Member, California Land Use Law and Policy Reporter (November 2008-August 2009)
- Lecturer, Lorman Seminars, Real Estate Development from Beginning to End, Local Government Approvals, Oakland, CA (February 2008)
- Co-Author, Low Impact Development: A Growing Trend in Stormwater Management, Builder Magazine (March 2007)
- Panelist, San Joaquin County Housing Symposium, Fresno, CA (February 2007)
- Adjunct Professor, McGeorge School of Law, Appellate Advocacy Program (2006)
- Presenter, Northern California Water Association and Downey Brand, "Ethics Training for Local Agency Officials, AB1234: The Brown Act" (2006)
- Presenter, "Groundwater Law and Hydrology," UC Davis Extension Program (October 2004)

COMMUNITY INVOLVEMENT

- Executive Board Member, Professional Women in Building, Building Industry Association of the Bay Area
- Member/Supporter, Golden Gate National Parks Conservancy (2009-present)

Wong, Linda (BOS)

From:

Robia Crisp [robiacrisp@gmail.com] Tuesday, January 15, 2013 12:01 PM

Sent: To:

Kim, Jane

Cc:

Wong, Linda (BOS)

Subject:

January 17, 2012 Rules Committee Meeting; Assessment Appeals Board 2 Appointments

Attachments:

toSupervisorKim.pdf

Please see the attached letter.

Thank you, Robia Crisp (415) 515-7013

File # 1300 B c: Rules Member

Robia S. Crisp 68 Collins Street San Francisco, CA 94118 (415) 515-7013

January 15, 2013

VIA EMAIL JANE.KIM@SFGOV.ORG

Chair Kim and Members of the Rules Committee 1 Dr. Carlton B. Goodlett Place City Hall, Room 244 San Francisco, Ca. 94102-4689

Re: Assessment Appeals Board 2

Dear Chair Kim and Members of the Rules Committee:

I submitted my application for a position on the Assessment Appeals Board 2 and have been informed that the Rules Committee will consider candidates at a meeting on Thursday, January 17, 2013. Unfortunately, I have a prior commitment at work that I am unable to re-schedule and I regret that I will not appear in person at the Committee meeting. Nonetheless, I am writing to express my strong interest in serving on the Board and provide a brief statement for your consideration. I also understand I may have someone appear on my behalf and currently I am working to arrange for such appearance.

I have practiced land use law for almost 10 years and in this capacity, have gained a basic understanding of real property assessments. In addition, making regular appearances before decision-making bodies throughout the Bay Area and Northern California, I have developed strong verbal communication skills and am very familiar with the procedural aspects of hearing testimony and evaluating evidence at public hearings. I would welcome the opportunity to participate in deciding disputes between the Assessor's Office and property owners, to equalize the valuation of the taxable property in San Francisco for the purpose of taxation. It would be my goal to develop a strong understanding of the substantive aspects involved and assist in making fair, reasonable, and correct decisions. My interest in serving on the Assessment Appeals Board 2 is not only to learn more about the assessment process but to contribute my time and professional skills to the community. As a Bay Area native, I have a keen interest in ensuring the positive and productive functioning of our wonderful City.

Despite my absence at this week's Rules Committee meeting, if selected for the Board position, I would commit to the hearings schedule and commit any additional time outside of the hearings as necessary to effectively carry out my duties. Thank you for your time and consideration.

Sincerely,

'Robia S. Crisp

Linda Wong [linda.wong@sfgov.org]

cc:

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

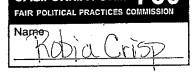
Date Received Official Use Only

| Please type or print in |) INK. | | | |
|---|--|--|---|--|
| NAME OF FILER | CISD | Robia | WIDDLE | |
| 1. Office, Agency | , or Court | 1,105,101 | | |
| Agency Name | County of San F | vancisa | | |
| ASSESSI | partment, District, If applicable Ment Appeals Boo | AVA Your Position | ard 2 mumber | |
| ► If filling for multip | le positions, list below or on an attachmen | t , · | | |
| Agency: | | Position: | · · · · · · · · · · · · · · · · · · · | |
| 2. Jurisdiction o | f Office (Check at least one box) | · . | | |
| State | | - | urt Commissioner (Statewide Jurisdiction) | |
| ☐ Multi-County | yn Francisco | | | |
| City of | WI I YMVICIOCO | | | |
| 3. Type of State | ment (Check at least one box) | | | |
| Dece | period covered is January 1, 2011, through mber 31, 2011. | Leaving Of (Check one, | fice: Date Left | |
| | period covered is | , through O The peri leaving (| od covered is January 1, 2011, through the date of office. | |
| Assuming Offi | ce: Date assumed | | od covered is, through of leaving office. | |
| Candidate: El | ection YearOffice | e sought, if different than Part 1: | | |
| 4. Schedule Sun | - | Total number of page | s including this cover page: | |
| | schedules or "None." | | | |
| | - Investments schedule attached - Investments schedule attached | | ome, Loans, & Business Positions - schedule attached ome - Gifts - schedule attached | |
| <u> </u> | Real Property - schedule attached | Schedule E - Inc | ome - Gifts - Travel Payments - schedule attached | |
| -or- None - No reportable interests on any schedule | | | | |
| 5. Verification | | | | |
| MAILING ADDRESS | STREET dress Recommended - Public Document) US STYECH NUMBER | San Francisco E-MAIL ADDRESS (OPTIC | STATE ZIP CODE CA 94118 | |
| <u>(415)</u> | | | - amail.com | |
| | attached schedules is true and complete. | acknowledge this is a public docum | | |
| l certify under per | nalty of perjury under the laws of the St | ate of California that the foregoing | is true and correct. | |
| Date Signed | 12/13 (month day, year) | Signature | the the originally signed statement with your filing official.) | |

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.



CALIFORNIA FORM

| NAME OF BUSINESS ENTITY VENCTO FINANCIAL GENERAL DESCRIPTION OF BUSINESS ACTIVITY GENERAL DESCRIPTION OF BUSINESS ACTIVITY | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
|--|--|
| Venture dest portfoliv FAIR MARKET VALUE □ \$2,000 - \$10,000 □ \$10,001 - \$100,000 | FAIR MARKET VALUE \$10,001 - \$100,000 |
| \$100,001 - \$1,000,000 (A) Over \$1,000,000 NATURE OF INVESTMENT | \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT |
| Stock Other (Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) | Stock Other (Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: |
| | / |
| NAME OF BUSINESS ENTITY (Fram A-2) | NAME OF BUSINESS ENTITY |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY C. COMMOVCE CO. | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
| FAIR MARKET VALUE \$2,000 - \$10,000 | 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 O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) | NATURE OF INVESTMENT Stock Other (Describe) Partnership O Income Received of \$0 - \$499 O income Received of \$500 or More (Report on Schedule C) |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: |
| | ACQUIRED DISPOSED |
| NAME OF BUSINESS ENTITY FIGURE TO SERVER A PROPERTY (From A-2) GENERAL DESCRIPTION OF BUSINESS ACTIVITY | MAME OF BUSINESS ENTITY GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
| Softwave CS - FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | 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 O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) | NATURE OF INVESTMENT Stock Other (Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: |
| | |
| 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 |
|---|
| Ratio Crisp |

| | , <u></u> |
|--|---|
| ► 1. BUSINESS ENTITY OR TRUST | ▶ 1. BUSINESS ENTITY OR TRUST |
| Canopy Capital | |
| Name 30) California Dr. Suite#3, | Name |
| Address (Business Address Acceptable) Buylungme, CA | Address (Business Address Acceptable) |
| Check one | Check one |
| ☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2 | ☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2 |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY DOVATE IMMESTMENT TOM | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
| FAIR MARKET VALUE IF APPLICABLE, LIST DATE: | FAIR MARKET VALUE IF APPLICABLE, LIST DATE: |
| \$0 - \$1,999 | \$0 - \$1,999 |
| \$2,000 - \$10,000 | \$2,000 - \$10,000/11 |
| S10,001 - \$100,000 ACQUIRED DISPOSED \$100,001 - \$1,000,000 | \$10,001 - \$100,000 ACQUIRED DISPOSED |
| Over \$1,000,000 | Over \$1,000,000 |
| NATURE OF INVESTMENT | NATURE OF INVESTMENT |
| Sole Proprietorship Partnership Other | Sole Proprietorship Partnership |
| YOUR BUSINESS POSITION | YOUR BUSINESS POSITION |
| ▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) | > 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) |
| S0 - \$499 S10,001 - \$100,000 | □ \$0 - \$499 □ \$10,001 - \$100,000 |
| \$500 - \$1,000 VX OVER \$100,000 | S500 - \$1,000 OVER \$100,000 S1,001 - \$10,000 |
| ☐ \$1,001 - \$10,000 \ | \$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) | ➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) |
| Velocity Financial Group, Cymax, | |
| Fretmatics | |
| 1,00111 001-03 | |
| ► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST | ▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST |
| Check one box: | Check one box: |
| ☐ INVESTMENT ☐ REAL PROPERTY | INVESTMENT I REAL PROPERTY |
| | |
| Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property | Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property |
| | |
| | |
| . Description of Business Activity or | Description of Business Activity or |
| City or Other Precise Location of Real Property | City or Other Precise Location of Real Property |
| FAIR MARKET VALUE IF APPLICABLE, LIST DATE: | FAIR MARKET VALUE IF APPLICABLE, LIST DATE: |
| \$2,000 - \$10,000 | \$2,000 - \$10,000 |
| \$10,001 - \$100,000 | \$10,001 - \$100,000 |
| \$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000 | Over \$1,000,000 |
| | |
| NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership | NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership |
| This contract in the state of t | |
| Leasehold Other | Leasehold Yrs. remaining Other |
| Check box if additional schedules reporting investments or real property are attached | ☐ Check box If additional schedules reporting investments or real property are attached |
| Comments: | FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov |

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM / UU
FAIR POLITICAL PRACTICES COMMISSION
Name
Ratio Chisp

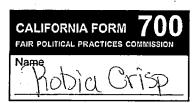
ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS ► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS ollus Street CITY IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: FAIR MARKET VALUE FAIR MARKET VALUE \$2,000 - \$10,000 **52,000 - \$10,000** <u>/ 11</u> <u>/ 11</u> / 11 \$10,001 - \$100,000 \$10,001 - \$100,000 ACQUIRED ACQUIRED DISPOSED \$100,001 - \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 Over \$1,000,000 NATURE OF INTEREST NATURE OF INTEREST Ownership/Deed of Trust ☐ Easement Ownership/Deed of Trust Leasehold Leasehold IF RENTAL PROPERTY, GROSS INCOME RECEIVED IF RENTAL PROPERTY, GROSS INCOME RECEIVED \$500 - \$1,000 **\$1,001 - \$10,000** \$0 - \$499 S0 - \$499 \$500 - \$1,000 **\$1,001 - \$10,000 \$10,001 - \$100,000** OVER \$100,000 OVER \$100,000 S10,001 - \$100,000 SOURCES OF RENTAL INCOME: If you own a 10% or greater SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of interest, list the name of each tenant that is a single source of income of \$10,000 or more. income of \$10,000 or more. You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows: NAME OF LENDER* NAME OF LENDER* ADDRESS (Business Address Acceptable) ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) TERM (Months/Years) INTEREST RATE ☐ None ☐ None HIGHEST BALANCE DURING REPORTING PERIOD HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000 **\$1,001 - \$10,000** \$500 - \$1,000 S10,001 - \$100,000 OVER \$100,000 OVER \$100,000 10,001 - \$100,000 Guarantor, if applicable Guarantor, if applicable

> FPPC Form 700 (2011/2012) Sch. B FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

Comments:

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)



| ► 1. INCOME RECEIVED | ► 1. INCOME RECEIVED |
|--|---|
| NAME OF SOURCE OF INCOME. | NAME OF SOURCE OF INCOME |
| ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| 100 California Street, SF | |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| | |
| YOUR BUSINESS POSITION | YOUR BUSINESS POSITION |
| Contract attorney | |
| GROSS INCOME RECEIVED | GROSS INCOME RECEIVED |
| \$500 - \$1,000 \$1,001 - \$10,000 | ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000 |
| \$10,001 - \$100,000 | \$10,001 - \$100,000 OVER \$100,000 |
| CONSIDERATION FOR WHICH INCOME WAS RECEIVED | CONSIDERATION FOR WHICH INCOME WAS RECEIVED |
| Salary Spouse's or registered domestic partner's income | Salary Spouse's or registered domestic partner's income |
| Loan repayment Partnership | ☐ Loan repayment ☐ Partnership |
| Sale of | Sale of |
| (Real property, car, boat, etc.) | (Real properly, car, boat, etc.) |
| Commission or Rental income, list each source of \$10,000 or more | Commission or Rental Income, list each source of \$10,000 or more |
| | |
| | |
| Other(Describe) | Other(Describe) |
| | |
| ► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER | RIOD |
| retail installment or credit card transaction, made in the | ending institutions, or any indebtedness created as part of a elender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's es: |
| NAME OF LENDER* | INTEREST RATE TERM (Months/Years) |
| | % |
| ADDRESS (Business Address Acceptable) | |
| | SECURITY FOR LOAN |
| BUSINESS ACTIVITY, IF ANY, OF LENDER | |
| 000112007107177777707 | None Personal residence |
| , and the second | |
| HIGHEST BALANCE DURING REPORTING PERIOD | None Personal residence Real Property Street address |
| | Real PropertyStreet address |
| HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 | Real Property |
| HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000 | Real PropertyStreet address |
| HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 | Real Property |
| HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000 | Real PropertyStreet address |
| HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 | Real Property |
| HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 | Real Property |

FPPC Form 700 (2011/2012) Sch. C FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

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

For Office Use Only: Appointed to Board #:



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

| Complete and return this original Application to the Clerk of the Board of Supervisors |
|--|
| Application for Appointment to: (Please circle one) Board 1 or Board 1 alternate Board 2 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? ves no |
| Name: JOSEPH K. 1HAM Home Address: - ANZA SI. TIS |
| City: San Francisco State: CA Zip code: 94121 |
| |
| Business Address: City: State: Zip Code: |
| Pager #: E-Mail Address: |
| Are you a United States citizen, or a resident alien who is eligible for and has applied for citizenship? Yes No |
| Have you ever been convicted of a felony in this state, or convicted of any offense which, if committed in this state, would be a felony? Yes No (If yes, please attach a statement describing the offense(s) for which you have been convicted, the date of the conviction(s), and the court(s) that convicted you.) Pursuant to Ordinance No. 393-98 the following qualifications are required: |
| he or she has a minimum of five years' professional experience in this state as one of the following: certified public accountant or public accountant, licensed real estate broker, attorney, or property appraiser accredited by a nationally recognized professional organization, or property appraiser certified by either the Office of Real Estate Appraiser or by the State Board of Equalization. Documentation of qualifying experience must be submitted with this application form. This requirement does not apply to incumbent board members nominated for appointment to their same seats. Please state your qualifications: ARE WINDLA LOSAL, LASING MARIANA PLANTAL AND LASING MARIANA PLANTAL P |
| De De State Lancille Teducian RIS ANIA CAN LOW |
| Civic Activities: Project Safe; Project OF; SF Chinese Club |
| To's The Transfer |
| multipley (options). |
| Other Personal Information (optional) |
| How many days a week would you be available for hearings? |
| Appearance before the RULES COMMITTEE is a requirement before any appointment can be made. |
| Please Note: Your application will be retained for one year. Applicant's Signature: Applicant's Signature: |
| For Office Use Only: Appointed to Board #: Seat #: Term Expires: |

Seat #:

Joseph K. Tham

(415)

email:

@hotmail.com

– 18th Street, San Francisco, CA 94114

OBJECTIVE

To serve the public and represent various community groups

EDUCATION

B.A. degree:

University of California, Berkeley, CA

Major subjects:

Political Economics and Business Law

A.A. and Real Estate Certificate

City College of San Francisco, CA Real Estate and Computer Sciences

COMMUNITY ACTIVITIES

Member, San Francisco Assessment Appeals Board Member, Small Property Owners of San Francisco

Member, San Francisco Neighbors Association

Project Safe – Crime Prevention Specialist; Bilingual in Chinese

Delegate, IFPTE Local 21-At Large Chapter

WORK EXPERIENCE

Commercial Real Property Officer

7-00 to 07-/2

San Francisco Public Utilities Commission, San Francisco, CA

- Negotiate and execute commercial lease and permit agreements for S.F. Water Department
- Negotiate with property owners, neighborhood groups, contractors, engineers, and others to facilitate blueprints and review design plans for new projects by the Engineering Bureau
- Appraise and update leases and permits to increase City revenues from \$5 to \$10 million

Real Estate Appraiser / Consultant

6-94 to 6-00

Great Pacific Appraisal Associates, San Francisco, CA

- Start real estate appraisal and consulting business from ground zero
- Develop and manage business to increase revenues by 25% annually

Appraisal Manager, Northern California Region

6-93 to 5-94

Union Bank of California, Oakland, CA

- Manage and evaluate 100+ appraisers and other personnel for Northern California region
- Arbitrate appraised values between homeowners, loan underwriters, and fee appraisers

Regional Appraisal Auditor / Senior Appraiser

09-86 to 2-92

American Savings (Washington Mutual) Bank, San Francisco, CA

- Setup and organize new regional appraisal review office for Northern California
- Conduct quarterly and annual audits of appraisal reports for quality control and compliance
- Consult on special or complex projects and sit on special panels for Bank owned properties

Date Received
Official Use Only

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS FILED

COVER PAGE

12 MAR 30 PH 5: 03

| Please type or print in ink. | (MIDDLE) |
|---|--|
| NAME OF FILER (LAST) | SAN FRANCISUOL C |
| THAM | min of the state o |
| 1. Office, Agency, or Court | BY S X |
| Agency Name | N TOPE |
| San Francisco Assessment Appeals Board | Your Position SE |
| Division, Board, Department, District, if applicable | Alternate Member |
| | NOX |
| ▶ If filing for multiple positions, list below or on an attachment | |
| Agency: | Position: |
| Agency: | |
| 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 |
| [2] Oily of | |
| 3. Type of Statement (Check at least one box) | |
| Annual: The period covered is January 1, 2011, through | h Leaving Office: Date Left 09 , 16 , 2011 (Check one) |
| December 31, 2011. -or- The period covered is | through The period covered is January 1, 2011, through the date of |
| The period covered is | leaving office. |
| Assuming Office: Date assumed/ | The period covered is, through the date of leaving office. |
| Candidate: Election YearOffice | ce sought, if different than Part 1: |
| 4. Schedule Summary | \mathcal{L} |
| Check applicable schedules or "None." | ► Total number of pages including this cover page: |
| Schedule A-1 · Investments – schedule attached | Schedule C - Income, Loans, & Business Positions - schedule attached |
| Schedule A-2 - Investments - schedule attached | ☐ Schedule D - Income - Gifts - schedule attached ☐ Schedule E - Income - Gifts - Travel Payments - schedule attached |
| Schedule B - Real Property - schedule attached | Schedule E - Income - Gills - Haver Fayirierus - Schodulo dilacino |
| ☐ None - No | -or- reportable interests on any schedule |
| 5. Verification | |
| MANUNIC ADDRESS STREET | CITY STATE ZIP CODE |
| (Business or Agency Address Recommended - Public Document) | San Francisco CA 94103 |
| DAYTIME TELEPHONE NUMBER | TEMAII ADDRESS (OPTIONAL) |
| | @yahoo.com |
| I have used all reasonable diligence in preparing this statement herein and in any attached schedules is true and complete. | ent. I have reviewed this statement and to the best of my knowledge the information contained I acknowledge this is a public docume |
| ! certify under penalty of perjury under the laws of the | State of California that the foregoing |
| Date Signed | Signature(File the originally signed statement with your filing official.) |
| (month, day, year) | It the new conditional authors appropriate to the conditional authors are conditional authors and appropriate to the conditional authors are conditional authors and an authors are conditional author |

FPPC Form 700 (2011/2012) FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE B Interests in Real Property (Including Rental Income)

| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
|---|
| Name |
| THAM, Joseph K. |

| | |
|---|--|
| ► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS | ► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS |
| 1524-015 | 2694-035 |
| CITY | CITY |
| San Francisco | San Francisco |
| FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 | FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 |
| NATURE OF INTEREST | NATURE OF INTEREST |
| Ownership/Deed of Trust Easement | Ownership/Deed of Trust Easement |
| Leasehold Other | Leasehold Other |
| IF RENTAL PROPERTY, GROSS INCOME RECEIVED | IF RENTAL PROPERTY, GROSS INCOME RECEIVED |
| \$50 - \$499 \$500 - \$1,000 \$1,001 - \$10,000 | |
| | ▼ \$10,001 - \$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. | 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. |
| | |
| | ending institutions made in the lender's regular course of without regard to your official status. Personal loans and ness must be disclosed as follows: |
| NAME OF LENDER* | NAME OF LENDER* |
| ADDRESS (During Address Association) | ADDRESS (Business Address Acceptable) |
| ADDRESS (Business Address Acceptable) | ADDITESS (Consiliess Audiess Acceptable) |
| BUSINESS ACTIVITY, IF ANY, OF LENDER | BUSINESS ACTIVITY, IF ANY, OF LENDER |
| | - 1 13000 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| INTEREST RATE TERM (Months/Years) | INTEREST RATE TERM (Months/Years) |
| % | % None |
| HIGHERT BALANCE DURING REPORTING REGION | |
| HIGHEST BALANCE DURING REPORTING PERIOD | DIOUTET DATAMON DISTANCE DESCRIPTION DESCRIPTION |
| S500 - \$1 000 | , HIGHEST BALANCE DURING REPORTING PERIOD |
| ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000 | ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000 |
| S10,001 - \$100,000 OVER \$100,000 | ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000 ☐ \$10,001 - \$100,000 ☐ OVER \$100,000 |
| <u> </u> | ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000 |
| S10,001 - \$100,000 OVER \$100,000 | ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000 ☐ \$10,001 - \$100,000 ☐ OVER \$100,000 |
| S10,001 - \$100,000 OVER \$100,000 | ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000 ☐ \$10,001 - \$100,000 ☐ OVER \$100,000 |

FPPC Form 700 (2011/2012) Sch. B FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

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



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

| Complete and return this original Application to the Clerk of the Board of Supervisors | | |
|---|--|--|
| Application for Appointment to: Board 1 or Board 1 alternate (Please circle one) Board 2 alternate Board 2 alternate | | |
| Name: Kristine Nelson Home Address: Buena Vista West | | |
| City: San Francisco State: CA Zip code: 94/17 | | |
| Business Address: 60 (Buena VISta W City: 5F State: CA Zip code: 1911) | | |
| Home Phone 415 Work Phone: 415 706-0985 Fax #: 415 -864-4378 | | |
| Pager #: E-Mail Address: Dmleffer 5. com | | |
| Are you a United States citizen, or a resident alien who is eligible for and has applied for citizenship? No | | |
| Have you ever been convicted of a felony in this state, or convicted of any offense which, if committed in this state, | | |
| would be a felony? Yes No (If yes, please attach a statement describing the offense(s) for which you have been convicted, the date of the conviction(s), and the court(s) that convicted you.) | | |
| Pursuant to California Revenue and Taxation Code Section 1624, the following qualifications are required: A person shall not be eligible for nomination for membership on an assessment appeals board unless he or she has a minimum of five years' professional experience in this state as one of the following: certified public accountant or public accountant, licensed real estate broker, attorney, or property appraiser accredited by a nationally recognized professional organization, or property appraiser certified by either the Office of Real Estate Appraiser or by the State Board of Equalization. Documentation of qualifying experience must be submitted with this application form. This requirement does not apply to incumbent board members nominated for appointment to their same seats. | | |
| Please state your qualifications: Certified General Appraisa License A6007334 | | |
| Deal Catalo Salas liverse | | |
| Please state your business and/or professional experience: Real Estate Appraiser since | | |
| | | |
| Occupation: Red Estate Soles / Real Estate Apparent Education: BA ULLA Business minor History Speak Sf. org Civic Activities: Past Secretary Landal Museum Friends Board termed off / National Charity legisc | | |
| Civic Activities: Past Secretary Landa Museum Friends Board fermed off National Charify legic | | |
| Ethnicity (optional): Sex (optional): M N F | | |
| Other Personal Information (optional) Let me know it you need additional information. | | |
| Would you be able to attend Day Meetings? Yes No Night meetings? Yes No | | |
| How many days a week would you be available for hearings? | | |
| Have you attended an Assessment Appeals Board meeting? \ \ Yes \ \ No Will affend the next one | | |
| 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: 11 6 2012 Applicant's Signature: The | | |
| For Office Use Only: Appointed Board #: Seat #: Teum Expires: | | |

Revised January 2005



Business, Transportation & Housing Agency

REAL ESTATE APPRAISER LICENSE OFFICE OF REAL ESTATE APPRAISERS

KRISTINE A. NELSON

has successfully met the requirements for a license as a general real estate appraiser in the State of

California and is, therefore, entitled to use the title "Certified General Real Estate Appraiser"

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

OREA APPRAISER IDENTIFICATION NUMBER AG007334

Date Issued: May 6, 2011

Date Expires: May 5, 2013

Director, OREA

Audit No. 133728

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

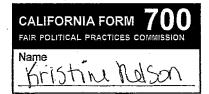
| Please type or print in ink. NAME OF FILER (LAST) | (FIRST) (MIDDLE) | |
|--|--|---------------|
| Nelson Kristine | Ann | |
| 1. Office, Agency, or Court | 7//// | |
| Agency Name | | |
| Board of Superviso Division, Board, Department, District, if applicable | ors | |
| Division, Board, Department, District, if applicable | Your Position | n. |
| Assessment Affeals | Board Board (2) Member | or H1, |
| ▶ 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 | |
| | <u></u> | |
| 3. Type of Statement (Check at least one box) | | |
| Annual: The period covered is January 1, 2011, through December 31, 2011. | Leaving Office: Date Left/(Check one) | |
| -or- The period covered is, th | rough O The period covered is January 1, 2011, through the date | te of |
| December 31, 2011. | leaving office. | |
| Assuming Office: Date assumed/ | The period covered is/, through the date of leaving office. | ough |
| Candidate: Election Year Office soug | ht, if different than Part 1: | |
| 4. Schedule Summary | Total number of pages including this cover page: | |
| | Schedule C - Income, Loans, & Business Positions - schedule | attachad |
| Schedule A-1 - Investments – schedule attached Schedule A-2 - Investments – schedule attached | Schedule D - Income - Giffs - schedule attached | attaorica |
| Schedule B - Real Property - schedule attached | Schedule E - Income – Gifts – Travel Payments – schedule atta | ached |
| -or- | | |
| None - No reportab | ole interests on any schedule | |
| 5. Verification | \ | |
| MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document) | CITY #405 STATE ZIP CODE | |
| 1 Dr. Carlton B. Goodle | H Place San Francisco, (A 941 | 02 |
| DAYTIME TELEPHONE NUMBER | E-MAIL ADDRESS (OPTIONAL) | |
| I have used all reasonable diagence in preparing this statement. I have herein and in any attached schedules is true and complete. I acknowledge | ave reviewed this statement and to the best of my knowledge the information of owledge this is a public document. | contained |
| I certify under penalty of perjury under the laws of the State of | · | |
| Date Signed 11 / 29 / 2012 | Signature (File the originally signed statement with your filing official.) | |
| (month, day, year) | (File the displicitly signed statement with your ming difficulty | |

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.



| NAME OF BUSINESS ENTITY | ► NAME OF BUSINESS ENTITY |
|--|--|
| PGE | |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
| | |
| Electricity | |
| FAIR MARKET VALUE | FAIR MARKET VALUE |
| \$2,000 - \$10,000 \$10,001 - \$100,000 | ☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000 |
| \$100,001 - \$1,000,000 Over \$1,000,000 | S100,001 - \$1,000,000 Over \$1,000,000 |
| NATURE OF INVESTMENT | NATURE OF INVESTMENT |
| N Stock 17 Other | □ Stock □ Other |
| (Describe) | (Describe) |
| Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) | Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) |
| O modifie (Cooking of those of moto (Copon of contains of | C mostly received of these miste measure of |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: |
| | |
| | / |
| | |
| NAME OF BUSINESS ENTITY | NAME OF BUSINESS ENTITY |
| <u>+n+e1</u> | |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY | GENERAL DESCRIPTION OF BUSINESS ACTIVITY, |
| Chio Malcer | |
| | |
| FAIR MARKET VALUE | FAIR MARKET VALUE |
| \$2,000 - \$10,000 | \$2,000 - \$10,000 \$10,001 - \$100,000 |
| S100,001 - \$1,000,000 Over \$1,000,000 | S100,001 - \$1,000,000 Over \$1,000,000 |
| NATURE OF INVESTMENT | NATURE OF INVESTMENT |
| Stock Other | Stock Other (Describe) |
| Partnership O Income Received of \$0 - \$499 | Partnership O Income Received of \$0 - \$499 |
| O Income Received of \$500 or More (Report on Schedule C) | O Income Received of \$500 or More (Report on Schedule C) |
| | |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: |
| | / / 11 / / 11 |
| ACQUIRED DISPOSED | ACQUIRED DISPOSED |
| | |
| ► NAME OF BUSINESS ENTITY | NAME OF BUSINESS ENTITY |
| Hewlett Packard | |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
| | |
| <u>Computers</u> | |
| FAIR MARKET VALUE | FAIR MARKET VALUE |
| \$2,000 - \$10,000 | [\$2,000 - \$10,000 |
| S100,001 - \$1,000,000 Over \$1,000,000 | S100,001 - \$1,000,000 Over \$1,000,000 |
| NATURE OF INVESTMENT | NATURE OF INVESTMENT |
| Stock Other | Stock Other |
| (Describe) Partnership O Income Received of \$0 - \$499 | (Describe) Partnership (O Income Received of \$0 - \$499 |
| O Income Received of \$500 or More (Report on Schedule C) | O Income Received of \$500 or More (Report on Schedule C) |
| | |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: |
| / / 11 / 11 | / / 11 / / 11 |
| ACQUIRED DISPOSED | ACQUIRED DISPOSED |
| en e | |
| | |

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

| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION | |
|---|--|
| Kristine helsen | |
| mi sine was | |

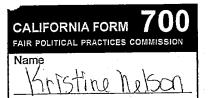
| ► 1. BUSINESS ENTITY OR TRUST | ▶ 1. BUSINESS ENTITY OR TRUST |
|---|--|
| Matthew 1. Ceffers : Kristine Nelson Trust | Mathew R. Letters: Kristinc Nelson Letters Trus |
| Home Office | Home Office |
| Address (Business Address Acceptable) | Address (Business Address Acceptable) |
| Check one Trust, go to 2 Business Entity, complete the box, then go to 2 | Check one Trust, go to 2 Business Entity, complete the box, then go to 2 |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
| FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 | FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 / / 11 / / 11 |
| NATURE OF INVESTMENT Sole Proprietorship Partnership Other YOUR BUSINESS POSITION | NATURE OF INVESTMENT Sole Proprietorship Partnership Other YOUR BUSINESS POSITION |
| ➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) | ➤ 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 | \$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 \$1,000 OVER \$100,000 |
| > 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) Kelly Pufferson Richard Cowie, Sarah Brondy, Anthony Critchku | Stephanic Pickering, Adam Mesnick |
| NICholas BOYG 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST Check one box: | ▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST Check one box: |
| NVESTMENT REAL PROPERTY | ☐ INVESTMENT ☐ REAL PROPERTY |
| 287 Sunche 25+ Sun vancisus Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property | 565-567 Natura Street, San Francisc Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property |
| Rental Property 187 Sanchez Description of Business Activity or City or Other Precise Location of Real Property | Rental Property 565-567 Nalama Description of Business Activity or City or Other Precise Location of Real Property |
| FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 Over \$1,000,000 | FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000 |
| NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership | NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership |
| Leasehold Other | Leasehold Other |
| Check box if additional schedules reporting investments or real property are attached | Check box if additional schedules reporting investments or real property are attached |
| Comments: | FPPC Form 700 (2011/2012) Sch. A-2 FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov |

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



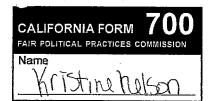
| ► 1. BUSINESS ENTITY OR TRUST | ▶ 1. BUSINESS ENTITY OR TRUST |
|--|---|
| Mutthen P. Leffers : Kristine Nelson Leffers Trust | Matthew 1. Lefters ? Kristine Nelson Letters Trust |
| Name / | Name |
| Address (Business Address Acceptable) | Address (Business Address Acceptable) |
| Check one Trust, go to 2 Business Entity, complete the box, then go to 2 | Check one Trust, go to 2 Business Entity, complete the box, then go to 2 |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
| FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 | FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$\$10,001 - \$100,000 \$10,001 - \$1,000,000 Over \$1,000,000 |
| NATURE OF INVESTMENT Sole Proprietorship Partnership Other YOUR BUSINESS POSITION | NATURE OF INVESTMENT Sole Proprietorship Partnership Other YOUR BUSINESS POSITION |
| ➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) | ➤ 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 | \$0 - \$499 \ \ \$10,001 - \$100,000 \ \ \$500 - \$1,000 \ \ \$1,001 - \$100,000 |
| > 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) Renee Rael, Michael Dworsky. | > 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary) Stacey Lonegan, Justin Berlin |
| Sary Sky Jennifer Bombasaro - Brudy Hannah Bustian | Peter Leach, John Garrett |
| ➤ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST Check one box: | ► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST Check one box: |
| ☐ INVESTMENT ☐ REAL PROPERTY | ☐ INVESTMENT ☐ REAL PROPERTY |
| Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property Rental Property 62-64 Moss Street, San Vancisia, CA Description of Business Activity or City or Other Precise Location of Real Property | Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property Rental Property 621 Nahoma Street, San Francisco Description of Business Activity or City or Other Precise Location of Real Property |
| FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000 | FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 |
| NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership | NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership |
| Leasehold Other | Leasehold Other |
| Check box if additional schedules reporting investments or real property are attached | Check box if additional schedules reporting investments or real property are attached |
| Comments: | FPPC Form 700 (2011/2012) Sch. A-2 FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov |

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



| ► 1. BUSINESS ENTITY OR TRUST | ▶ 1. BUSINESS ENTITY OR TRUST |
|--|---|
| Mutthew P. Leffers: Kristine Nelson Leffers Trust | Matthew 1. Leffers: Krishne Nelson Leffer Tru |
| Home Office | Home Office |
| Address (Business Address Acceptable) | Address (Business Address Acceptable) |
| Check one Trust, go to 2 Business Entity, complete the box, then go to 2 | Check one Trust, go to 2 Business Entity, complete the box, then go to 2 |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
| FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 | FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 |
| NATURE OF INVESTMENT Sole Proprietorship Partnership Other YOUR BUSINESS POSITION | NATURE OF INVESTMENT Sole Proprietorship Partnership Other YOUR BUSINESS POSITION |
| ➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA | ➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) |
| SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) \$0 - \$499 | \$10,001 - \$100,000 \$500 - \$1,000 \$1,001 - \$100,000 \$1,001 - \$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.) | > 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary) Don Whipple, Nail's h Mayla |
| ▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST | ▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST |
| Check one box: INVESTMENT REAL PROPERTY | Check one box: INVESTMENT REAL PROPERTY |
| 23-25 Moss St. S.f. CA | 1316-1318 Fulton Street San Juniisio |
| Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property Rental Property | Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property |
| 23-25 Moss Sweet Sun Wunciso (If Description of Business Activity or City or Other Precise Location of Real Property | 13/6-13/8 Fulton Sheet Sun Juneis Description of Business Activity or City or Other Precise Location of Real Property |
| 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 | FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 |
| NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership | NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership |
| Leasehold Other | Leasehold Other |
| Check box if additional schedules reporting investments or real property are attached | Check box if additional schedules reporting investments or real property are attached |
| Comments: | FPPC Form 700 (2011/2012) Sch. A-2 FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov |

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



| ► 1. BUSINESS ENTITY OR TRUST | ▶ 1. BUSINESS ENTITY OR TRUST - |
|---|--|
| Motthew 1. Leffers : Kristine Nelson Lefter Trus | 4 |
| Home Office | Name |
| Address (Business Address Acceptable) | Address (Business Address Acceptable) |
| Check one Trust, go to 2 Business Entity, complete the box, then go to 2 | Check one ☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2 |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
| FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 |
| NATURE OF INVESTMENT Sole Proprietorship Partnership | NATURE OF INVESTMENT Sole Proprietorship Partnership |
| YOUR BUSINESS POSITION | YOUR BUSINESS POSITION |
| ➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) | ➤ 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 \$109,000 \$1,001 - \$10,000 | \$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.) Megumi Mori Morgan Brown | ➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) |
| Misuel Pino, Marilu Picar, | |
| ▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST | ► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST |
| Check one box: | Check one box: |
| INVESTMENT REAL PROPERTY | ☐ INVESTMENT ☐ REAL PROPERTY |
| Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property Lental Property | Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property |
| 445-449 Tehama St. San francisco | |
| Description of Business Activity <u>or</u> City or Other Precise Location 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 | FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED DISPOSED Over \$1,000,000 |
| NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership | NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership |
| Leasehold Other | Leasehold Other |
| Check box if additional schedules reporting investments or real property are attached | Yrs. remaining Check box if additional schedules reporting investments or real property are attached |
| Comments: | FPPC Form 700 (2011/2012) Sch. A.2. |

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

| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
|---|
| Name Kristine Nelson |

| | ► 1. INCOME RECEIVED |
|---|--|
| NAME OF SOURCE OF INCOME | NAME OF SOURCE OF INCOME |
| Kea Estate Commission ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| ADDRESS (Business Address Acceptable) 114 Lyon Street San Francisco | |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| Buyers Agent YOUR BUSINESS POSITION | YOUR BUSINESS POSITION |
| | YOUR BUSINESS POSITION |
| Buyers Agent | |
| GROSS INCOME RECEIVED \$1,001 - \$10,000 | GROSS INCOME RECEIVED \$500 - \$1,000 |
| ☐ \$10,001 - \$100,000 ☐ OVER \$100,000 | \$10,001 - \$100,000 OVER \$100,000 |
| CONSIDERATION FOR WHICH INCOME WAS RECEIVED Salary Spouse's or registered domestic partner's income | CONSIDERATION FOR WHICH INCOME WAS RECEIVED Salary Spouse's or registered domestic partner's income |
| Loan repayment Partnership | Loan repayment Partnership |
| Sale of(Real property, car, boat, etc.) | Sale of(Real property, car, boat, etc.) |
| Commission or Rental Income, list each source of \$10,000 or more | Commission or Rental Income, list each source of \$10,000 or more |
| | |
| Other | Other |
| Other(Describe) | (Describe) |
| | |
| 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER | (OD |
| 4 | |
| retail installment or credit card transaction, made in the | ending institutions, or any indebtedness created as part of a lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's s: |
| retail installment or credit card transaction, made in the members of the public without regard to your official staregular course of business must be disclosed as follow | lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's |
| retail installment or credit card transaction, made in the members of the public without regard to your official staregular course of business must be disclosed as follow NAME OF LENDER* LEFKOS AFFONOMIOS | lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's s: |
| retail installment or credit card transaction, made in the members of the public without regard to your official staregular course of business must be disclosed as follow NAME OF LENDER* LEFKOS AFFONOMIOS | lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's s: INTEREST RATE TERM (Months/Years) 9 % None 3 46005 |
| retail installment or credit card transaction, made in the members of the public without regard to your official staregular course of business must be disclosed as follow NAME OF LENDER* LEFKOS AFFONOMIOS ADDRESS (Business Address Acceptable) | lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's s: INTEREST RATE TERM (Months/Years) 9 % None SECURITY FOR LOAN |
| retail installment or credit card transaction, made in the members of the public without regard to your official staregular course of business must be disclosed as follow NAME OF LENDER* LEFKOS AFFONOMIOS | lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's s: INTEREST RATE TERM (Months/Years) 9 % None SECURITY FOR LOAN None Personal residence |
| retail installment or credit card transaction, made in the members of the public without regard to your official staregular course of business must be disclosed as follow NAME OF LENDER* LEFKOS AFFONOMIOS ADDRESS (Business Address Acceptable) | lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's s: INTEREST RATE TERM (Months/Years) 9 % None SECURITY FOR LOAN |
| retail installment or credit card transaction, made in the members of the public without regard to your official staregular course of business must be disclosed as follow NAME OF LENDER* LEFKOS AFFONOMIOS ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER | lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's s: INTEREST RATE TERM (Months/Years) 9 % None SECURITY FOR LOAN None Personal residence |
| retail installment or credit card transaction, made in the members of the public without regard to your official staregular course of business must be disclosed as follow NAME OF LENDER* LEFKOS AFFONOMIOS ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER | lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's s: INTEREST RATE TERM (Months/Years) 9 % None 3 4 Car S SECURITY FOR LOAN None Personal residence Real Property 445-449 7e haw a San Fanti |
| retail installment or credit card transaction, made in the members of the public without regard to your official staregular course of business must be disclosed as follow NAME OF LENDER* LEFKOS AFFONOWIOS ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD | lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's s: INTEREST RATE TERM (Months/Years) 9 % None 3 4 Car S SECURITY FOR LOAN None Personal residence Real Property 445-449 7e haw a San Fanti |
| retail installment or credit card transaction, made in the members of the public without regard to your official staregular course of business must be disclosed as follow NAME OF LENDER* LEFKOS AFFONOWIOS ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 | lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's s: INTEREST RATE TERM (Months/Years) 9 % None SECURITY FOR LOAN None Personal residence Real Property 445-449 Street address |
| retail installment or credit card transaction, made in the members of the public without regard to your official staregular course of business must be disclosed as follow NAME OF LENDER* LEFKOS AFFONOWIOS ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 | lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's s: INTEREST RATE TERM (Months/Years) 9 % None SECURITY FOR LOAN None Personal residence Real Property 445-449 Telama San Fanti |
| retail installment or credit card transaction, made in the members of the public without regard to your official staregular course of business must be disclosed as follow NAME OF LENDER* LEFKOS AFFONOWIOS ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$10,001 - \$10,000 | lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's s: INTEREST RATE TERM (Months/Years) 9 % None 3 4 Car S SECURITY FOR LOAN None Personal residence Real Property 445 - 449 7 e haw a San Fant (Street address |

FPPC Form 700 (2011/2012) Sch. C FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

Assessment Appeals Board

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



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

| Complete and return this original Application to the Clerk of the Board of Supervisors |
|--|
| Application for Appointment to: (Please circle one) Board 1 or Board 1 alternate (Board 2 or Board 2 alternate |
| Name: Shawn Ridsell Home Address: Broderick St. City: San Francisco State: CA Zip code: 94117 |
| City: 5 Francisco State: CA Zip code: 94117 |
| Business Address: 2128 Browd way City: Oak cand State: Cd Zip code: 94612 |
| Business Address: 2128 13roud way City: Oak cand State: C4 Zip code: 94612 Home Phone (4.5) — Work Phone: (51-) 986-(30) Fax #: (510) 986-(30) |
| Pager #: E-Mail Address:)acc. Com |
| Are your United States citizen, or a resident alien who is eligible for and has applied for citizenship? Yes |
| 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 Yes |
| (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.) |
| A person shall not be eligible for nomination for membership on an assessment appeals board unless he or she has a minimum of five years' professional experience in this state as one of the following: certified public accountant or public accountant, licensed real estate broker, attorney, or property appraiser accredited by a nationally recognized professional organization, or property appraiser certified by either the Office of Real Estate Appraiser or by the State Board of Equalization. Documentation of qualifying experience must be submitted with this application form. This requirement does not apply to incumbent board members nominated for appointment to their same seats. |
| Please state your qualifications: I am an artiforney 1. censed in Carifornia. I have been a lander For 14 fears. |
| Please state your business and/or professional experience: I have been a proof-zing afformed For 14 Hears - Pieusa Sea afformed resume |
| Occupation: Attorned Education: Juris Doctorate |
| Civic Activities: Volunteer, Aids 12911 referral Panel. |
| Ethnicity (optional): Sex (optional): M F |
| Other Personal Information (optional) |
| Would you be able to attend Day Meetings? Yes No Night meetings? Yes No |
| How many days a week would you be available for hearings? |
| Have you attended an Assessment Appeals Board meeting? Yes Avo |
| 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: |
| For Office Use Only: Appointed Board #: Seat #: Term Expires: |

SHAWN RIDGELL BRODERICK STREET SAN FRANCISCO, CA 04117 TELEPHONE (415

Email: '_____a)aol.com

EDUCATION

UNIVERSITY OF SAN FRANCISCO SCHOOL OF LAW

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

UNIVERSITY OF SAN FRANCISCO

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

WORK EXPERIENCE

MANAGING ATTORNEY, JANUARY, 2007- PRESENT

RIDGELL & LAWLOR, LLP; Oakland, CA

Client representation in civil litigation and business matters. Areas of practice include contracts, consumer litigation, business litigation, business formation, insurance litigation, personal injury, and elder abuse. Client representation in mediations, arbitrations, and trial.

ARBITRATOR, JANUARY, 2008-PRESENT

FINANCIAL INDUSTRY REGULATORY AUTHORITY (FINRA);

San Francisco, CA

Responsible for hearing and deciding disputes arising out of breach of contract and employment law matters within the securities industry. Reviewed pleadings and other documents in evaluating disputes. Issued rulings on discovery matters.

ATTORNEY, 2001-2006

CHARLES SCHWARTZ, P.C.; Oakland, CA

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

LEGAL EDITOR, 1999-2006

CONTINUING EDUCATION OF THE BAR; Oakland, CA

Conducted extensive legal research on various legal subjects, including areas involving business law, civil litigation, real property, and estate planning. 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.

480

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

CALIFORNIA FORM 700.

PAIN POLITICAL PRACTICES COMMISSION,
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

Date Received

COVER PAGE

| | ME OF FILER (LAST) | (FIRST) (MDPLT) |
|---------------|---|--|
| NAA | 12;45e | |
| 1, | Office, Agency, or Court | |
| | Agency Name ASSeSSment. | Appeals Board |
| | Division, Board, Department, District, if applicable | le Your Position Board Mamber |
| | ► If filing for multiple positions, list below or on | n an attachment. |
| | Agency; | Position: |
| Ž. | Jurisdiction of Office (Check at least | one box) |
| | ☐ State | ☐ Judge or Court Commissioner (Statewide Jurisdiction) |
| | Multi-County | County of |
| | Multi-County San Francisco | ~ = (\$ C O |
| 3, | Type of Statement (Check at least one | e box) |
| | Annual: The period covered is January 1, | , 2011, through |
| | December 31, 2011. The period covered is | a new that do not seem as the dot of |
| | Assuming Office: Date assumed | O The period covered is, through the date of leaving office. |
|) | Candidate: Election Year | Office sought, if different than Part 1: |
| 4. | Schedule Summary Check applicable schedules or "None." | ➤ Total number of pages including this cover page: |
| | ☐ Schedule A-1 - Investments - schedule att ☐ Schedule A-2 - Investments - schedule att ☐ Schedule B - Real Property - schedule att | llached Schedule D. Income - Gilts - schedule attached |
| | · · · · · · · · · · · · · · · · · · · | None - No reportable interests on any schedule |
| 5, | Verification | |
| | NUTLING ADDRESS STREET NOCOMMENDED - Pubsic Docum | |
| | 1513 | E-MAIL ADDRESS (OPTICANAL) |
| | Unacted at reasonable disperse in preparation | g this statement. I have reviewed this statement and to the best of my knowledge the information contain and complete. I acknowledge this is a public document. |
| | I certify under penalty of perjury under the I | laws of the State of California that the foregoing is true and correct. |
| | 1//0/13 | for Digl |
| | Date Signed | Signature———————————————————————————————————— |

FPPC Toll-Free Holpline; 868/275-3772 www.fppc.ca.gov

San Francisco BOARD OF SUPERVISORS

Date Printed:

January 8, 2013

Date Established:

December 24, 1998

Active

ASSESSMENT APPEALS BOARD NO. 2

Contact and Address:

Dawn Duran Assessment Appeals Board City Hall, Room 405

Phone: (415) 554-6778 Fax: (415) 554-6775

Email: Dawn.Duran@sfgov.org

Authority:

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

Board Qualifications:

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

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

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

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

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

"R Board Description" (Screen Print)

San Francisco BOARD OF SUPERVISORS

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

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

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

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

Sunset Clause: None