

BOARD of SUPERVISORS



City Hall
1 Dr. Carlton B. Goodlett Place, Room 244
San Francisco 94102-4689
Tel. No. (415) 554-5184
Fax No. (415) 554-5163
TDD/TTY No. (415) 554-5227

Application for Boards, Commissions, Committees, & Task Forces

Name of Board/Commission/Committee/Task Force: Homelessness Oversight Commission

Seat # (Required - see Vacancy Notice for qualifications): BOS 6

Full Name: Erica Moseley

Zip Code: 94105

Occupation: Senior Clerk/Coordinator

Work Phone: _____ Employer: City and County of SF/ DPH

Business Address: 755 S.Van Vess San Francisco CA Zip Code: 94110

Business Email: Erica.moseley@sfdph.org

Home Email: _____

Pursuant to Charter, Section 4.101(a)(2), Boards and Commissions established by the Charter must consist of residents of the City and County of San Francisco who are 18 years of age or older (unless otherwise stated in the code authority). For certain appointments, the Board of Supervisors may waive the residency requirement.

Resident of San Francisco: Yes ☒ No ☐

If No, place of residence: _____

18 Years of Age or Older: Yes ☒ No ☐

Pursuant to Mayoral Order, members of boards/commissions are required to be Covid-19 vaccinated and attend in-person meetings.

Covid-19 Vaccinated: Yes ☒ No ☐

Pursuant to Charter, Section 4.101(a)(1), please state how your qualifications represent the communities of interest, neighborhoods, and the diversity in ethnicity, race, age, sex, sexual orientation, gender identity, types of disabilities, and any other relevant demographic qualities of the City and County of San Francisco:

Greetings, I am applying for Seat 6, designated for an individual with significant experience providing services to, or engaging in advocacy on behalf of, persons experiencing homelessness. My experience of homelessness began as a child and continued for 18 years, living under bridges, in congregate housing, and moving from state to state with my father. Our homelessness was the direct result of a broken system that failed to provide adequate resources and supports for single fathers raising daughters. Today I am a Lived Experience Advocate with the National Alliance to End Homelessness, author of Trapped in the Homeless Hustle, and recognized internationally on Google and through my public work as a leader in this field. On September 17, 2025, I will be speaking with Nancy Pelosi regarding permanent housing subsidies and Medicaid access. My work and book are designed to highlight systemic barriers and create pathways for preventing homelessness before, during, and after the pandemic. I believe San Francisco can and should be a national leader in this work; the city should include lived-experienced voices in its reports, elevate people with firsthand knowledge to policy-making roles, host the kind of conferences that center lived experience as the standard for innovation. I am deeply familiar with San Francisco's homeless response system and their challenges. These include a shortage of permanent supportive housing, long waiting lists in Coordinated Entry Systems, insufficient mental health and substance use resources, fragmented coordination among city agencies and non-profit providers, and persistent barriers for nontraditional families such as fathers raising children, LGBTQ+ youth, ex-tech workers, etc. If appointed to seat 6, I will advocate for changes that address these issues; my goal is to strengthen collaborations across agencies, improve outcomes for unhoused residents, and position San Francisco as the number one city in the world for elevating lived experience leadership in homelessness solutions.

Business and/or Professional Experience:

Global Lived Experience Advocate verified on Google, attending conferences around the world. National Alliance of to End Homelessness Advocate and speaker and coordinator, schedule to speak on Capital Hill Day Sep 17, 2025 regarding permanent housing, subsidies and Medicaid access. Author of Trapped in the homeless hustle, internationally recognized on Google; book currently available in 15 districts across San Francisco. Conducts educational tours at the SF libraries and across the city to raise awareness about homelessness and systemic challenges. Case Manager and Out-reach Manager at Catholic Charities, Lived Experience Advocate and Fundraiser at Hamilton Learning and Development work at Glide. Coordinator and Clerk at City and County of SF DPH. Permanent Fundraiser experience for homelessness programs. Uber speaker to end Homeless, Salesforce.org speaker to end homelessness. Meta (Facebook) Full Cycle Machine Learning Recruiter & Onboarding

Civic Activities:

Civil and Community Engagement : Volunteer and Mentor with Larkin Street Youth Services, Homeless Prenatal Program, Glide, Saint Anthony, Third Baptist Church, Zion Church and Tipping point. Partnered with Hamilton, Homeless prenatal. Salesforce, national alliance of homelessness, LB libraries to organized neighborhood outreach, mentorship programs and resources drives. Host workshops and panels with Glide Foundation and Bay Area Community Resources connecting lived experience to policy solutions, Advocated nationally at Capital Hill Day, providing recommendations on homelessness policy and resources allocation.

Have you attended any meetings of the body to which you are applying? Yes ☐ No ☒

An appearance before the Rules Committee may be required at a scheduled public hearing, prior to the Board of Supervisors considering the recommended appointment. Applications should be received ten (10) days prior to the scheduled public hearing.

Date: 9/12/25 Applicant's Signature (required): Erica Moseley

(Manually sign or type your complete name.)

NOTE: By typing your complete name, you are hereby consenting to use of electronic signature.)

Please Note: Your application will be retained for one year. Once completed, this form, including all attachments, become public record.

FOR OFFICE USE ONLY:

Appointed to Seat #: _____ Term Expires: _____ Date Vacated: _____

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Date Initial Filing Received
Filing Official Use Only

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
MOSELEY ERICA MARIE

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

CITY AND COUNTY OF SAN FRANCISCO

Division, Board, Department, District, if applicable

HOMELESSNESS OVERSIGHT COMMISSION

Your Position

SEAT 6 BOS

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

Agency: Position: SEAT HOLDER

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

- ☐ State ☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
- ☐ Multi-County CITY AND COUNTY OF SAN FRANCISCO ☐ County of
- ☐ City of SAN FRANCISCO ☐ Other

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

- ☐ **Annual:** The period covered is January 1, 2024, through December 31, 2024.
- ☐ **Leaving Office:** Date Left ____/____/_____
(Check one circle below.)
- ☐ **-or-** The period covered is ____/____/_____, through December 31, 2024.
- ☐ The period covered is January 1, 2024, through the date of leaving office.
- ☐ **Assuming Office:** Date assumed ____/____/_____. ☐ **-or-** The period covered is ____/____/_____, through the date of leaving office.
- ☐ **Candidate:** Date of Election 2025 and office sought, if different than Part 1: _____

4. Schedule Summary (required)

► Total number of pages including this cover page: 3

Schedules attached

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

-or- ☒ **None - No reportable interests on any schedule**

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
855 BRANNAN ST SAN FRANCISCO CA 94103

DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(415) 310-6982 ERICAMOSELEY108@GMAIL.COM

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

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

Date Signed 9/12/2025
(month, day, year)

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

BOARD of SUPERVISORS



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Application for Boards, Commissions, Committees, & Task Forces

Name of Board/Commission/Committee/Task Force: Homelessness Oversight Commission

Seat # (Required - see Vacancy Notice for qualifications): 6



Zip Code: 94102

Occupation: Business Consultant

Work Phone: _____ Employer: Self-Employed

Business Address: _____ Zip Code: _____

Business Email: reyjavier@mac.com Home Email: _____

Pursuant to Charter, Section 4.101(a)(2), Boards and Commissions established by the Charter must consist of residents of the City and County of San Francisco who are 18 years of age or older (unless otherwise stated in the code authority). For certain appointments, the Board of Supervisors may waive the residency requirement.

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

18 Years of Age or Older: Yes ☒ No ☐

Pursuant to Charter, Section 4.101(a)(1), please state how your qualifications represent the communities of interest, neighborhoods, and the diversity in ethnicity, race, age, sex, sexual orientation, gender identity, types of disabilities, and any other relevant demographic qualities of the City and County of San Francisco:

Thank you for the opportunity to apply for a seat with the Homelessness Oversight Commission. My name is Rey Emmanuel Javier, a housing advocate and resident of District 6 in the City.

From 20017 - 2020, I served SHELTER, Inc., a 501 (c) (3) non-profit which serves the homeless population and those at risk of homelessness in Contra Costa, Solano and Sacramento Counties. At SHELTER, Inc. As a housing manager, I worked with the Continuum of Care, and program participants from the respective counties, offering services covered by HUD, Assembly Bill AB-109 Program; CalWorks, Mental Health Services Act (MHSA), the Veterans Affairs, recipients of HUDVASH and Section 8 Voucher Programs, as well as serving the survivors of victims of domestic violence, under the California Office of Emergencies grant, in partnership with the Family Justice Center, STAND and Bay Area Legal Aid.

Business and/or Professional Experience:

Prior to my work at SHELTER, Inc., I served the City and County of San Francisco, as a Civil Servant for the Mayor's Office of Housing, responsible for the administration of the Inclusionary housing programs, as well as down payment assistance loan programs for first-time homebuyers, from 2008 to 2017. I served under Myrna Melgar, now supervisor for District 7, as well as Douglas Shoemaker, now Commissioner of the San Francisco Housing Authority.

During my tenure at the Mayor's Office of Housing, I worked with community based organizations and non-profits that offered asset building, credit counseling and housing education to help guide San Franciscans to apply and enter the affordable housing rental and homeownership programs. At the Mayor's Office of Housing, I had the opportunity to work with our very diverse community.

Civic Activities:

I have also served the Consumer Credit Counseling Service of San Francisco from 2006-2008, as a Housing Supervisor, responsible for managing people and programs that delivered public education dealing with budgeting, savings, credit, subsidized and affordable housing. During my time at Consumer Credit Counseling Service, my team and I were also responsible for helping San Franciscans avoid foreclosures and tenant evictions.

As a first-generation immigrant to the United States, and becoming a U.S. Citizen in the mid 90s, I know the importance of being involved with the community and local government efforts. I am engaged with the Filipino-American, API and LGBTQ communities. I plan to become even more active with any capacity maybe granted to me in a Commission or Board post to assist and offer value, feedback, technical assistance and guidance when needed.

Being a tenant, living in the City, I strive to contribute to the progress and efforts the City and County - and there is so much more work to do.

Have you attended any meetings of the body to which you are applying? Yes ☒ No ☐

An appearance before the Rules Committee may be required at a scheduled public hearing, prior to the Board of Supervisors considering the recommended appointment. Applications should be received ten (10) days prior to the scheduled public hearing.

Date: 07/25/2025

Applicant's Signature (required):

Rey Javier

(Manually sign or type your complete name.)

NOTE: By typing your complete name, you are hereby consenting to use of electronic signature.)

Please Note: Your application will be retained for one year. Once completed, this form, including all attachments, become public record.

FOR OFFICE USE ONLY:

Appointed to Seat #: _____ Term Expires: _____ Date Vacated: _____

Rey Emmanuel Javier

SUMMARY:

Management professional with over a decade of successful work experience in the areas of social service for non-profits and local government, customer service, business operations, program and project management. Licensed Real Estate Salesperson and Notary Public for the State of California.

WORK HISTORY:

Business Consultant

Self Employed – Bay Area, CA

May 2020 - Present

Successfully partnered with small business owners to increase profits and efficiencies. Study, create and document policies to improve procedures affecting HR, operations, finance and customer service care, administrative functions, advertising and marketing.

Trained the trainer. Team member recruitment and retention. Co-authored grant request for \$100K, awarded by the California Department of Social Services for facilities capital improvements. Co-authored COVID-19 relief grant requests from State grant program. Established process for collections of delinquent revenue with over 75% success rate.

Housing Manager

Shelter, Inc. – Concord, CA

December 2017 – April 2020

Manage a team of five staff members responsible for guiding unhoused clients and those at risk of homelessness to housing, resources, education, employment and self-sufficiency. Build business relationships to acquire and retain housing providers.

Effectively managed client care and program eligibility verification. Negotiation of rent and leases. Housing placements for over 250 households annually, surpassing targets by over 25%; vendor management; created operations policies and procedures to meet community and agency goals resulting to over 25% capacity improvement. Managed and analyzed agency's programmatic needs; negotiation of rental lease contracts, analysis of rent comparable; title verification; monitored landlord's adherence to fair housing. Adherence to Health Insurance Portability and Accountability Act (HIPPA) and all health care privacy regulations, Harm Reduction and compliance with Americans with Disabilities Act (ADA) standards. Performed Habitability Quality Standards inspections.

Directly managed Esperanza Program, a California Office of Emergency Services grant, in partnership with the Family Justice Center and Stand Against Domestic Violence organizations which provide direct services to victims of domestic violence.

Successfully managed relations with clients, non-profit organizations, local government resources and housing providers to support agency core programs including Continuum of Care transitional and permanent housing placement; CalWorks; Veterans Affairs

Housing Programs; Emergency Services Grant; Contra Costa County Mental Health System, Housing and Urban Development (HUD) programs; Assembly Bill-109 for re-entry funded efforts; recipients of Housing Choice Voucher Program.

Co-managed SHELTER, Inc.'s low-income and affordable housing sites, including leasing of HUD, HOME and Tax Credit based properties.

Program Officer

City and County of San Francisco, CA

March 2008 - March 2017

Managed the operations process for the City and County of San Francisco's housing programs with a portfolio of over 1,500 housing units. Directly responsible for implementation of program policies and processes, including public outreach, marketing of programs; applicant eligibility review, tenant certification, audit; mortgage loan and credit worthiness review; underwriting and loan documentation for escrow transactions of over \$20M annually, producing approximately 150 housing units every year dedicated to low and moderate income households. Supervision of workflow for junior staff members.

Managed the application approval process; review, analysis underwriting and funding of Down Payment Assistance Loan Program with over \$2M budget. Author of the City's grant application for California Housing and Community Development (HCD) CalHome Mortgage Assistance loan program with combined grant awards total of over \$2M funds for down payment assistance loans to low-income first-time homebuyers.

Program Supervisor

Consumer Credit Counseling Service, SF, CA

October 2006 - March 2008

Management of non-profit business department and supervision of fourteen member staff; hiring, training and employee retention. Community outreach and public education.

Responsible for program management and partner relations. Implemented process improvements and developed efficiency models and tools to maximize workflow.

Educate consumers about affordable housing programs, first-time homebuyer programs; fair housing; pre-purchase and post-purchase education. Early delinquency and foreclosure prevention, loss mitigation process; understanding the credit and mortgage process, debt management plans and credit report reviews.

EDUCATION:

Business Administration
University of St Tomas
Manila, Philippines

Notary Public Certificate
National Notary Association,
Chatsworth, CA

Real Estate
Kaplan Real Estate School
Ft. Lauderdale, FL

AWARDS: Recipient of Senator Dianne Feinstein Commendation for Community Service. Recipient of Tipping Point Community Fellowship for Emerging Leaders Program. Recipient of certificates from HUD and NeighborWorks.

REFERENCES: Furnished upon request.

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Date Initial Filing Received
Filing Official Use Only

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
JAVIER REY EMMANUEL

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Division, Board, Department, District, if applicable Your Position

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

Agency: Position:

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

- ☒ State ☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
- ☐ Multi-County ☐ County of SAN FRANCISCO
- ☐ City of SAN FRANCISCO ☐ Other

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

- ☐ **Annual:** The period covered is January 1, 2024, through December 31, 2024.
- ☐ **Leaving Office:** Date Left ____/____/____ (Check one circle below.)
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- ☐ The period covered is ____/____/____, through the date of leaving office.
- ☐ **Candidate:** Date of Election ____ and office sought, if different than Part 1: ____

4. Schedule Summary (required)

► Total number of pages including this cover page: 1

Schedules attached

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

-or- ☒ **None - No reportable interests on any schedule**

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
1390 MARKET STREET, APT 2027 SAN FRANCISCO CA 94102

DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(415) 887-8901 REYJAVIER@MAC.COM

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

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

Date Signed 07/25/2025
(month, day, year)

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

BOARD of SUPERVISORS



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Application for Boards, Commissions, Committees, & Task Forces

Name of Board/Commission/Committee/Task Force: Homeless Oversight Commission

Seat # (Required - see Vacancy Notice for qualifications): Seat # 6

Full Name: Thomas James Rocca

[Redacted] CA Zip Code: 94116

[Redacted] Occupation: Real Estate Investor /Operator

Work Phone: 415-729-1701 Employer: Castenada Investments, Inc.

Business Address: 88 Perry Street #800 san Francisco, CA Zip Code: 94107

Business Email: trocca@7hp.com Home Email: none

Pursuant to Charter, Section 4.101(a)(2), Boards and Commissions established by the Charter must consist of residents of the City and County of San Francisco who are 18 years of age or older (unless otherwise stated in the code authority). For certain appointments, the Board of Supervisors may waive the residency requirement.

Resident of San Francisco: Yes ☒ No ☐ If No, place of residence: _____
18 Years of Age or Older: Yes ☒ No ☐

Pursuant to Charter, Section 4.101(a)(1), please state how your qualifications represent the communities of interest, neighborhoods, and the diversity in ethnicity, race, age, sex, sexual orientation, gender identity, types of disabilities, and any other relevant demographic qualities of the City and County of San Francisco:

Born and Raised in San Francisco of Mexican and Italian descent I am a Married Male with 3 Adult children I am 64 years old.

I was homeless in 1986 in Washoe County Nevada

I am a recovering Alcoholic and Drug Addict. I am an active member of Alcoholics Anonymous.

Since 1996 I have been the Owner/Operator of Yerba Buena Commons, a 257 SRO project located in the south of Market Neighborhood, Which is 100% affordable to Very Low Income people. We have and continue to work with HUD, VA VASH and the general public in providing housing which is the first rung of the housing/shelter ladder for formerly Homeless/ Unhoused people.

Business and/or Professional Experience:

I am the CEO and Managing Partner of two Real Estate companies based in San Francisco, Seven Hills Properties and YBC Management II, LP
We have developed and financed over \$500 million of Real Estate Projects. I continue to own and manage the Real Estate that we have developed which includes over 500 units of 100% affordable housing projects in San Francisco and San Jose.
I am the current CEO and former CFO of a medical device company, IV Access Technologies.
I am a current Board Member and Chairman of the Audit Committee of an Israeli software company, ASOCS, LTD.
I am a Board Member of Team a US based AI startup

Civic Activities:

I currently am a member and participate in the Yerba Buena Alliance.
I was a board member of the Forest Hills Association for three years serving as President from April 2020 to April 2022.
I was previously a Board Member of Meals on Wheels for 3 years
i was a member of the board of Youth SF for 4 years

Have you attended any meetings of the body to which you are applying? Yes ☒ No ☐

An appearance before the Rules Committee may be required at a scheduled public hearing, prior to the Board of Supervisors considering the recommended appointment. Applications should be received ten (10) days prior to the scheduled public hearing.

Date: July 1, 2025 Applicant's Signature (required): 
(Manually sign or type your complete name.
NOTE: By typing your complete name, you are hereby consenting to use of electronic signature.)

Please Note: Your application will be retained for one year. Once completed, this form, including all attachments, become public record.

FOR OFFICE USE ONLY:

Appointed to Seat #: _____ Term Expires: _____ Date Vacated: _____

July 1, 2025

Rules Committee

San Francisco Board of Supervisors

To Whom It May Concern,

I am writing to express my interest in serving on the Homeless Oversight Commission, established through the passage of Proposition C. I believe my personal experiences, professional background, and ongoing community involvement make me a strong candidate for this important role.

I meet several of the qualifications outlined for the Mayor's appointee seats on the Commission:

1. **Lived Experience:** In 1986, I personally experienced homelessness while living in the Reno-Tahoe area. This experience has given me a deep understanding of the challenges faced by unhoused individuals.
2. **Recovery and Service:** I have been clean and sober for the past 34 years and remain an active member of Alcoholics Anonymous. Through this program, I have supported numerous individuals in their journey toward sobriety.
3. **Community Engagement:** I am an active member of the Yerba Buena Alliance and previously served on the board of the Forest Hills Association, including two years as President (April 2020 – April 2022).
4. **Affordable Housing Development:** I developed and currently own Yerba Buena Commons, a 257-unit Single Room Occupancy (SRO) project that collaborates with HUD and the VA's VASH program to provide housing for formerly homeless individuals.

In addition to these qualifications, I bring extensive professional experience:

- I am the CEO and Managing partner of two San Francisco-based real estate companies, Seven Hills Properties and YBC Development II. LP, which have developed and financed over \$500 million in real estate projects over the past 34 years. Our portfolio includes more than 500 units of affordable housing in San Francisco and San Jose; all subject to rigorous audit requirements from investors and HUD.
- I also serve as the CEO and former CFO of IV Access Technologies, a medical device company.
- Furthermore, I am a board member and Chairman of the Audit Committee for ASOCS, Ltd., an Israeli software company.

I also meet two of the qualifications for the Board of Supervisors' appointee seats:

1. **Lived Experience:** My personal experience with homelessness in 1986.
2. **Housing Provider:** My ownership and operation of a 257-unit SRO that actively partners with the VA VASH program and HUD to house formerly homeless individuals.

Thank you for considering my application. I am committed to serving the City of San Francisco and contributing meaningfully to the work of the Homeless Oversight Commission.

Sincerely,

Thomas Rocca

COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Rocca Thomas

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City and County of San Francisco

Division, Board, Department, District, if applicable

Homeless Oversight Commission

Your Position

Commissioner

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

Agency: Position:

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

☐ State

☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
(Statewide Jurisdiction)

☐ Multi-County

☒ County of San Francisco

☐ City of

☐ Other

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

☐ Annual: The period covered is January 1, 2024, through
December 31, 2024.

-or-

The period covered is / / , through
December 31, 2024.

☐ Leaving Office: Date Left / /
(Check one circle below.)

☐ The period covered is January 1, 2024, through the date of
leaving office.

-or-

☐ The period covered is / / , through
the date of leaving office.

☒ Assuming Office: Date assumed / /

☐ Candidate: Date of Election and office sought, if different than Part 1:

4. Schedule Summary (required)

► Total number of pages including this cover page:

Schedules attached

☒ Schedule A-1 - Investments - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☒ Schedule A-2 - Investments - schedule attached

☐ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)

88 Perry Street STE 800

San Francisco

CA

DAYTIME TELEPHONE NUMBER

(415) 7291701

E-MAIL ADDRESS

trocca@7hp.com

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

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

Date Signed July 1, 2025
(month, day, year)

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

SCHEDULE A-2

Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

<BLUE> is a required field

* Select from drop down list

CALIFORNIA FORM
FAIR POLITICAL PRACTICES COMMISSION

700

Name

Tom Rocca

1. Business Entity or Trust (For reporting a trust, enter the name then skip to box 2.)						2. Gross Income Received	3. Sources of Income of \$10,000 or more	4. Investments or Interests in Real Property Held by the Business Entity or Trust (Use a separate line for each investment or real property interest.)						
NAME AND ADDRESS OF BUSINESS ENTITY OR TRUST (Business Address Acceptable) (If Trust, go to 2)	GENERAL DESCRIPTION OF BUSINESS ACTIVITY	FAIR MARKET VALUE*	LIST DATE ACQUIRED OR DISPOSED (mm/dd/yyyy)	A or D	NATURE OF INVESTMENT (if "other," describe)*	YOUR BUSINESS POSITION	INCLUDE YOUR PRO RATA SHARE OF GROSS INCOME TO ENTITY/TRUST*	LIST SINGLE SOURCES OF INCOME OF \$10,000 OR MORE	INVESTMENT-BUSINESS ENTITY/NAME, AND BUSINESS ACTIVITY	REAL PROPERTY-LIST PRECISE LOCATION OF REAL PROPERTY	FAIR MARKET VALUE*	LIST DATE ACQUIRED OR DISPOSED (mm/dd/yyyy)	A or D	NATURE OF INTEREST (if "other," describe)*
Lavabiancheria, 88 Perry Street	Laundry	\$100,001 - \$1,000,000			Consulting Income	LLC Member	\$10,001-\$100,000	None						
Pinnacle Properties, 3115 Vicente Street	Real Estate	\$10,001 - \$100,000			Consulting Income	Consultant & Shareholder	\$10,001-\$100,000	None						
Junipero Serra Associates, 301 Junipero Serra Blvd., #204	Real Estate	Over \$1,000,000			Member Income	LLC Member	\$10,001-\$100,000	PopPack, LLC; Chicago Title; Russian School of Mathematics; Terence Redmond; Biddle Shaw Insurance; State of California Contractors Board; Farmers Insurance; CCD Law Group; AR Sanchez-Corea & Associates	139-301 Junipero Serra Blvd.	139-301 Junipero Serra Blvd.	Over \$1,000,000			Ownership/Deed of Trust
The Tom Rocca and Kari Rocca Revocable Trust	Trust	Over \$1,000,000			Trust Income	Beneficiary	Over \$100,000	None						
								None	Seven Hills Capital Partners, LLC		\$10,001 - \$100,000			Ownership/Deed of Trust
								None	Seven Hills Development Management, LLC		\$10,001 - \$100,000			Ownership/Deed of Trust
								None	Perry Street Investments, LLC		\$100,001 - \$1,000,000			Ownership/Deed of Trust

[illegible]

Cell: A3

Note: After completion, ensure that there are no blue fields on this schedule. If so, you must complete that cell.

Cell: A8

Note: Disclose the name and address of the business entity or trust.

Cell: B8

Note: Provide a general description of the business activity of the entity (for example, pharmaceuticals, computers, automobile manufacturing, or communications).

Cell: C8

Note: Select the highest fair market value of your investment during the reporting period. If you are filing a candidate or an assuming office statement, indicate the fair market value on the filing date or the date you took office, respectively.

Cell: D8

Note: If you initially acquired or entirely disposed of this interest during the reporting period, enter the date acquired or disposed.

Cell: E8

Note: Indicate whether you acquired or disposed of the business entity or trust by showing “A” if acquired, or “D” if disposed.

Cell: F8

Note: Identify the nature of your investment (for example, stocks, warrants, options, or bonds).

Cell: G8

Note: Disclose your job title or business position held with the entity, (for example, if you were a director, officer, partner, trustee, employee, or held any position of management).

Cell: H8

Note: Select your pro rata share of the gross income received by the business entity or trust. This amount includes your pro rata share of the gross income from the business entity or trust, as well as your community property interest in your spouse’s or registered domestic partner’s share. Gross income is the total amount of income before deducting expenses, losses, or taxes.

Cell: I8

Note: Disclose the name of each reportable source of income from which your pro rata share is \$10,000 or more. (See Schedule A-2 Instructions for more information.)

Cell: J8

Note: Report any investments or interests in real property held by the business entity or trust identified in part 1 if your pro rata share of the interest held was \$2,000 or more during the reporting period.

Cell: K8

Note: If real property, report the address or other precise location (for example, an assessor's parcel number).

Cell: L8

Note: Select the highest fair market value of your real property or investment during the reporting period. (Report the fair market value of the portion of your residence claimed as a tax deduction if you are utilizing your residence for business purposes.)

Cell: M8

Note: If you initially acquired or entirely disposed of this investment or interest in real property during the reporting period, enter the date acquired or disposed.

Cell: N8

Note: Indicate whether you acquired or disposed of the business entity or interest in real property by showing "A" if acquired, or "D" if disposed.

Cell: O8

Note: Select the nature of your interest. If you select "Leasehold" you must also type the years remaining on the lease.

Investments

(Ownership Interest is Less Than 10%)

CALIFORNIA FORM
FAIR POLITICAL PRACTICES COMMISSION

Name

Tom Rocca

[illegible]

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Cell: A7

Note: After completion, ensure that there are no blue fields on this schedule. If so, you must complete that cell.

Cell: A9

Note: Disclose the name of the business entity.

Cell: B9

Note: Provide a general description of the business activity of the entity (for example, pharmaceuticals, computers, automobile manufacturing, or communications).

Cell: C9

Note: Select the highest fair market value of your investment during the reporting period. If you are filing a candidate or an assuming office statement, indicate the fair market value on the filing date or the date you took office, respectively.

Cell: D9

Note: Identify the nature of your investment (for example, stocks, warrants, options, or bonds).

Cell: E9

Note: If you initially acquired or entirely disposed of this interest during the reporting period, enter the date acquired or disposed.

BOARD of SUPERVISORS



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

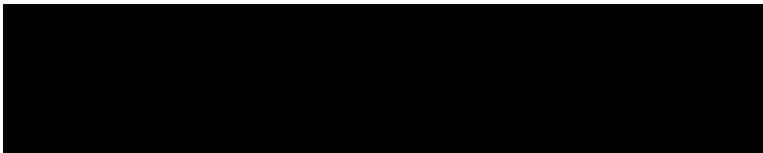
San Francisco 94102-4689
Tel. No. (415) 554-5184 Fax
No. (415) 554-5163 TDD/TTY
No. (415) 554-5227

Application for Boards, Commissions, Committees, & Task Forces

Name of Board/Commission/Committee/Task Force: Homelessness Oversight Commission (HOC)

Seat # (Required - see Vacancy Notice for qualifications): 6

Full Name: Vinia Ramos-Castro aka Vanessa Castro



Zip Code: 94102

Family Resouce Coordinator

La Raza Community Resource Center

Work Phone: _____

Employer: _____

Business Address: _____ Zip Code: _____

Business Email: _____ Home Email: _____

Pursuant to Charter, Section 4.101(a)(2), Boards and Commissions established by the Charter must consist of residents of the City and County of San Francisco who are 18 years of age or older (unless otherwise stated in the code authority). For certain appointments, the Board of Supervisors may waive the residency requirement.

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

18 Years of Age or Older: Yes ☒ No ☐

Pursuant to Charter, Section 4.101(a)(1), please state how your qualifications represent the communities of interest, neighborhoods, and the diversity in ethnicity, race, age, sex, sexual orientation, gender identity, types of disabilities, and any other relevant demographic qualities of the City and County of San Francisco:

My upbringing was rooted in the dynamic communities of San Francisco - specifically the Mission, Bernal Heights, and Bayview - a city that would become the canvas for my life's work. The dual inheritance of my parents profoundly influenced my vocation: my mother, a war refugee, and my father, who followed the seasonal rhythm of farm work. This unique heritage, amplified by my mother's dedication to the Sanctuary movement of San Francisco in the 1980s, naturally launched my career in the realms of non-profit and public health. My professional life has since been a continuous commitment to advocating for and serving unhoused people and families. I possess significant expertise in direct service delivery, specializing in securing housing and coordinating holistic, wraparound care for those most in need.

Business and/or Professional Experience:

My professional trajectory is defined by a deep engagement with diverse San Francisco organizations. From my foundational work at Horizons Unlimited as a teenager and my time at the Good Samaritan Family Resource Center during college, I have consistently pursued roles dedicated to community well-being. Within the public health sector, I was instrumental in supporting clients and improving accessibility at both the Mission Neighborhood Health Center and the Women's Community Clinic. My advocacy extends to my practice as a Doula, where I have provided essential labor support during numerous hospital births throughout the city, maintaining a firm commitment to pro-bono care when needed. Today, I leverage this extensive background as the Family Resources Coordinator at La Raza Community Resource Center, offering vital support to families facing persistent housing instability.

Civic Activities:

My commitment to community empowerment is demonstrated by my active involvement in grassroots movements and direct care. I passionately supported organizations like PODER in their advocacy for the establishment of In Chan Kaajal Park, a vital community space. Furthermore, I served as a Community Doula through Sisterweb, where I provided essential, compassionate birth support to unhoused and working-class mothers throughout San Francisco. My dedication to health accessibility was further solidified through my volunteer work with Clínica Martín-Baró, a crucial free clinic serving the Mission and Bernal Heights districts.

Have you attended any meetings of the body to which you are applying? Yes ☐ No ☒

An appearance before the Rules Committee may be required at a scheduled public hearing, prior to the Board of Supervisors considering the recommended appointment. Applications should be received ten (10) days prior to the scheduled public hearing.

Date: 10/08/2025

Vinia Ramos-Castro aka Vanessa Castro

Applicant's Signature (required): _____

(Manually sign or type your complete name.)

NOTE: By typing your complete name, you are hereby consenting to use of electronic signature.)

Please Note: Your application will be retained for one year. Once completed, this form, including all attachments, become public record.

FOR OFFICE USE ONLY:

Appointed to Seat #: _____ Term Expires: _____ Date Vacated: _____

**STATEMENT OF ECONOMIC INTERESTS
COVER PAGE**
A PUBLIC DOCUMENT

Date Initial Filing Received
Filing Official Use Only

Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Ramos-Castro	Vinia	Banesa

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Division, Board, Department, District, if applicable

Your Position

Homelessness Oversight Commission

Commissioner

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

Agency: _____ Position: _____

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

State

Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
(Statewide Jurisdiction)

Multi-County

County of _____

☒ City of San Francisco

Other _____

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

☒ Annual: The period covered is January 1, 2024, through
December 31, 2024.

Leaving Office: Date Left ____/____/_____
(Check one circle below.)

-or-

The period covered is ____/____/_____, through
December 31, 2024.

The period covered is January 1, 2024, through the date of
leaving office.

-or-

Assuming Office: Date assumed ____/____/____

The period covered is ____/____/_____, through
the date of leaving office.

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

4. Schedule Summary (required)

► Total number of pages including this cover page: 3

Schedules attached

☒ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

Schedule A-2 - Investments - schedule attached

Schedule D - Income - Gifts - schedule attached

Schedule B - Real Property - schedule attached

Schedule E - Income - Gifts - Travel Payments - schedule attached

-or- None - No reportable interests on any schedule

5. Verification

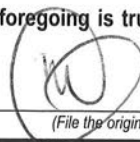
MAILING ADDRESS	STREET	CITY	STATE	ZIP CODE
(Business or Agency Address Recommended - Public Document)				
235 Oak Street #5		San Francisco	CA	94102
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS		
(415) 312-6981		vinia.rc@gmail.com		

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

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

Date Signed 10/09/2025
(month, day, year)

Signature



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

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

NAME OF BUSINESS ENTITY

Principal Investments

GENERAL DESCRIPTION OF THIS BUSINESS

\$7000

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 IRA
 (Describe)

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

IF APPLICABLE, LIST DATE:

 / / 24 / / 24
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

Stock ☐ Other
 (Describe)

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

IF APPLICABLE, LIST DATE:

 / / 24 / / 24
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

Stock ☐ Other
 (Describe)

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

IF APPLICABLE, LIST DATE:

 / / 24 / / 24
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

Stock ☐ Other
 (Describe)

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

IF APPLICABLE, LIST DATE:

 / / 24 / / 24
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

Stock ☐ Other
 (Describe)

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

IF APPLICABLE, LIST DATE:

 / / 24 / / 24
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

Stock ☐ Other
 (Describe)

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

IF APPLICABLE, LIST DATE:

 / / 24 / / 24
 ACQUIRED DISPOSED

Comments: _____

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

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name _____

▶ 1. INCOME RECEIVED		▶ 1. INCOME RECEIVED	
NAME OF SOURCE OF INCOME <u>La Raza Community Resource Center</u>		NAME OF SOURCE OF INCOME _____	
ADDRESS (Business Address Acceptable) <u>474 Valencia Street #100 SF, CA 94103</u>		ADDRESS (Business Address Acceptable) _____	
BUSINESS ACTIVITY, IF ANY, OF SOURCE _____		BUSINESS ACTIVITY, IF ANY, OF SOURCE _____	
YOUR BUSINESS POSITION <u>Family Resources Coordinator</u>		YOUR BUSINESS POSITION _____	
GROSS INCOME RECEIVED No Income - Business Position Only		GROSS INCOME RECEIVED No Income - Business Position Only	
\$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 OVER \$100,000	
CONSIDERATION FOR WHICH INCOME WAS RECEIVED		CONSIDERATION FOR WHICH INCOME WAS RECEIVED	
☒ Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)		Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	
Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.) _____		Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.) _____	
Sale of _____ (Real property, car, boat, etc.)		Sale of _____ (Real property, car, boat, etc.)	
Loan repayment _____		Loan repayment _____	
Commission or Rental Income, list each source of \$10,000 or more _____		Commission or Rental Income, list each source of \$10,000 or more _____	
(Describe)		(Describe)	
Other _____ (Describe)		Other _____ (Describe)	

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD		
* You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:		
NAME OF LENDER*	INTEREST RATE	TERM (Months/Years)
_____	_____% None	_____
ADDRESS (Business Address Acceptable) _____	SECURITY FOR LOAN	
BUSINESS ACTIVITY, IF ANY, OF LENDER _____	None Personal residence	
HIGHEST BALANCE DURING REPORTING PERIOD	Real Property _____	
\$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000	Street address City	
	Guarantor _____	
	Other _____ (Describe)	
Comments: _____		