File No	140839	Committee Item No4
		Board Item No.

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Rules	Date <u>July 24, 2014</u>
Board of Supervisors Meeting	Date
Cmte Board	
Motion Resolution Ordinance Legislative Digest Budget and Legislative Analyst Youth Commission Report Introduction Form Department/Agency Cover Letter MOU Grant Information Form Grant Budget Subcontract Budget Contract/Agreement Form 126 – Ethics Commission Award Letter Application Public Correspondence	•
OTHER (Use back side if additional space	ce is needed)
Form 700	
	Date July 18, 2014 Date
Completed by.	Jaic

JAN 2 4 201.

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



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

Complete and return this ori	ginal Application to the Assessment Appeals Board
Application for Appointment to (Please circle one)	Board 1 or Board 1 Alternate Board 2 or Board 2 Alternate Board 3 or Board 3 Alternate
Enter your name, mailing address and daytime teleph for public review, you may list your business/office ac other personal contact information.	none number in the spaces provided. Because this form is a document available didress, telephone number and e-mail address in lieu of your home address or
Do you authorize release of your private/person	al information? 🔎 yes 🔲 no
Name: Michael Sla Hery	Home Address: Pc Box
City: /dy//wild	State: CA Zip code: 925 49
Business Address: 333 5,914 No. (4)	Home Address: PC BCX State: CA Zip code: 92549 Fire 42 no From Angeles State: CA Zip Code: 9007
Home Phone: 951 Work	Phone: 213 6305518 Fax #: 213 6305555
Pager #: E-Ma	il Address: Ms/a/c
Are you a United States citizen, or a resident ali	en who is eligible for and has applied for citizenship?, 🗆 Yes 🗆 No
would be a felony? Tyes In No	s state, or convicted of any offense which, if committed in this state, ibing the offense(s) for which you have been convicted, burt(s) that convicted you.)
Pursuant to Ordinance No. 393-98 the follow	ing qualifications are required:
she has a minimum of five years' professional e accountant or public accountant; (2) licensed re- nationally recognized professional organization, Appraiser or by the State Board of Equalization. application form. This requirement does not app same seats.	ation for membership on an assessment appeals board unless he or experience in this state as one of the following: (1) certified public al estate broker; (3) attorney; or (4) property appraiser accredited by a or property appraiser certified by either the Office of Real Estate. Documentation of qualifying experience must be submitted with this ply to incumbent board members nominated for appointment to their
Please state your qualifications: GHoir Bar Card attach	1ey for 31 years (copy of
Please state your business and/or professional 2002 - 09: represented	experience: former Deputy City Attorney
Occupation: A Hovn by	Education: B.A., J.D.
Civic Activities: South End Rowing	& Club, State Bar Bosiness Lan Section
Ethnicity (optional):	Sex (optional): M F
Other Personal Information (optional)	<u> </u>
Would you be able to attend Day Meetings?	for hearings? How many evenings a week? 5
Appearance before the RULES COMM	IITTEE is a requirement before any appointment can be made.
Date: 1-21-14 Applica	ant's Signature: Madure Sea He
For Office Use Only: Appointed to Board #:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,



THE STATE BAR OF CALIFORNIA

MICHAEL KEVIN SLATTERY

PRESERVE AND IMPROVE OUR JUSTICE SYSTEM N ORDER TO ASSURE A FREE AND JUST SOCIETY UNDER LAW. July active members are entitled to practice law.

U Chlef Executive Officer



Thursday, June 12, 2014

ATTORNEY SEARCH

Michael Kevin Slattery - #107303

Current Status: Active

This member is active and may practice law in California.

See below for more details.

Profile Information

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

Bar Number:

107303

Address:

Idyllwild PO Box =

Phone Number:

Fax Number:

r: Not Available

Idyllwild, CA 92549

Map it

e-mail:

mslat@

County: Riv

Riverside

Undergraduate School:

Princeton Univ; Princeton NJ

District:

District 4

Sections:

Business Law

Law School:

USC Law School; Los Angeles CA

Status History

Effective Date

Status Change

Present

Active

12/3/1982

Admitted to The State Bar of California

Explanation of member status

Actions Affecting Eligibility to Practice Law

Disciplinary and Related Actions

Overview of the attorney discipline system.

This member has no public record of discipline.

Administrative Actions

This member has no public record of administrative actions.

Start New Search »

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Assuming Office: Date assumed	The period covered is/	, thro
	office sought, if different than Part 1:	
Candidate: Election year and	office sought, if different than Part 1:	
4. Schedule Summary	MANAGEMENT OF CONTROL	
Check applicable schedules or "None."	 Total number of pages including this cover p 	page:
Schedule A-1 - Investments - schedule attached	Schedule C - Income, Loans, & Business Posit	ions - schedule a
Schedule A-2 - Investments - schedule attached	Schedule D · Income - Gifts - schedule attach	
Schedule B - Real Property - schedule attached	Schedule E - Income - Gifts - Travel Payment	s – schedule altac
· · · · · · · · · · · · · · · · · · ·	-or-	
None - No	reportable interests on any schedule	and the second s
5. Verification		
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P. O. NO x	4/11/16 CK 42549	
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I have used all reasonable diligence in preparing this statem herein and in any attached schedules is true and complete	nent. I have reviewed this statement and to the best of my knowledge by I acknowledge this is a public document.	oo nonsamonn so
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FPPC Form 700 [201 FPPC Advice Email: advice@fpp FPPC Toll-Free Helpline: 866/275-3772 www.fpp

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FPPC Form 700 (2013/2014 FPPC Advice Email: advice@fppi FPPC Toll-Free Helpline: 866/275-3772 www.fppi

Guarantor

HIGHEST BALANCE DURING REPORTING PERIOD

S500 - \$1,000 S1,001 - \$10,000

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

Comments: ...

SCHEDULE A-1 Investments Stocks, Bonds, and Other Interests (Ownership Interest is Less Then 10%) FOR CONTROL OF BUSINESS ENTITY AND ALL OF		į s	earch Mail Search Web	हैं बे Mic
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Cosossment Appeals Board

Revised July 2013

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



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

Complete and return this original Application to the Assessment Appeals Board
Application for Appointment to: Board 1 or Board 1 Alternate (Please circle one) Board 2 or Board 2 Alternate Board 3 or Board 3 Alternate
Enter your name, mailing address and daytime telephone number in the spaces provided. Because this form is a document available for public review, you may list your business/office address, telephone number and e-mail address in lieu of your home address or other personal contact information.
Do you authorize release of your private/personal information?
Name: JAMES REYNOLDS Home Address: MCAllister State
City: SAN FRANCISCO State: CD Zip code: 94118
Business Address: 2001 MLAIISEC Stall City: SAN Francis State: Chr Zip Code: 94118
Home Phone: 415-359-9660 Fax #: 415-359-9660
Pager #: E-Mail Address: APPRAISERS/WSF()
Are you a United States citizen, or a resident alien who is eligible for and has applied for citizenship? 🕱 Yes 🗌 No
Have you ever been convicted of a felony in this state, or convicted of any offense which, if committed in this state, would be a felony? Yes No
(If yes, please attach a statement describing the offense(s) for which you have been convicted, the date of the conviction(s), and the court(s) that convicted you.)
Pursuant to Ordinance No. 393-98 the following qualifications are required:
A person shall not be eligible for nomination for membership on an assessment appeals board unless he or she has a minimum of five years' professional experience in this state as one of the following: (1) certified public accountant or public accountant; (2) licensed real estate broker; (3) attorney; or (4) property appraiser accredited by a nationally recognized professional organization, or property appraiser certified by either the Office of Real Estate Appraiser or by the State Board of Equalization. Documentation of qualifying experience must be submitted with this application form. This requirement does not apply to incumbent board members nominated for appointment to their same seats.
Please state your qualifications: 13 year of nesidential Real Estate Apprasing
Please state your business and/or professional experience: Bylan is Not Appnaisen (not illentiful)
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Civic Activities: your service
Ethnicity (optional): Sex (optional): F
Other Personal Information (optional)
Would you be able to attend Day Meetings? Yes No Evening meetings? Yes No How many days a week would you be available for hearings? Have you attended an Assessment Appeals Board meeting? Yes No
Appearance before the RULES COMMITTEE is a requirement before any appointment can be made. Please Note: Your application will be retained for one year.
Date: 3 19 2014 Applicant's Signature:
F. Office Head Only Associated to Deput 4.

Licensee Details:

History

Back to Results

New Search

First Name	James
Middle	F
Last Name	Reynolds
License Number	027371
Company	James Reynolds
Phone	
Street	— McAllister Street, No. —
City	San Francisco
State	CA
ZIP	94118
County	San Francisco
Existing License	Renewal - USPAP
License Level	AR
License Status	Active
Date Issued	12/15/2013
Date Expired	12/14/2015
Renewal Issued	
Renewal Expires	
Next Renewal	Full CE
Compliance	
License	

Possible License Types: License, Temporary 150-Day, Temporary Practice Permit, Out of State, Reciprocal

Possible License Levels: Trainee, Residential, Certified Residential, Certified General, Temporary

Possible License Status: Active, Expired, Government Status, Pending Active, Retired, Restricted, Revoked, Surrendered, Suspended

<u>License</u> <u>Status</u>	License Level	<u>License</u> <u>Type</u>	Effective Date	Expiration Date
Active	Certified Residential	License	12/15/2013	12/14/2015
Expired	Certified Residential	License	12/15/2011	12/14/2013
Expired	Certified Residential	License	12/15/2009	12/14/2011
Expired	Certified Residential	License	12/15/2007	12/14/2009
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STATEMENT OF ECONOMIC INTERLISTS COVER PAGE

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		-	Hearing Office	<u> </u>	· · · · · · · · · · · · · · · · · · ·
► If filling for multip	le positions, list below or on an attach	nment. (Do not use	acronyms)		
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Multi-County				Francisco	
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Schedule A-1	Investments – schedule attached				iness Positions – schedule attache
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Schedule B - F	Real Property - schedule attached				el Payments – schedule attached
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MAILING ADDRESS	STREET	CITY	·	STATE	ZIP CODE
McAlliste	ress Recommended - Public Document)	San Francisc	20	CA	94118
DAYTIME TELEPHONE N			E-MAIL ADDRESS (OPTIONAL)		34110
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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
General Electric	Consolidated Communication
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Conglomerate	Telephone
FAIR MARKET VALUE	FAIR MARKET VALUE
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7 / 13	/ / 13 / / 13
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	11
Comments:	

SCHEDULE B Interests in Real Property (Including Rental Income)



ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
2001 McAllister Street, #11	
CITY	CITY
San Francisco	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
NATURE OF INTEREST	NATURE OF INTEREST
☑ Ownership/Deed of Trust ☐ Easement	Ownership/Deed of Trust
Leasehold Coner	Leasehold
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
S0 - \$499 S500 - \$1,000 S1,001 - \$10,000	□ \$0 - \$499 □ \$500 - \$1,000 □ \$1,001 - \$10,000
510,001 - \$100,000 QVER \$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.
☑ None	None
[V] None	
[✓] None	T. None
You are not required to report loans from commercia:	I lending institutions made in the lender's regular course of
You are not required to report loans from commercial business on terms available to members of the public loans received not in a lender's regular course of bus	I lending institutions made in the lender's regular course of the without regard to your official status. Personal loans and siness must be disclosed as follows:
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San Francisco **BOARD OF SUPERVISORS**

Date Printed: July 18, 2014

Date Established:

July 3, 2013

Active

ASSESSMENT APPEALS BOARD NO. 3

Contact and Address:

Dawn Duran Assessment Appeals Board City Hall, Room 405 San Framcsco, CA 94102

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

Email: Dawn.Duran@sfgov.org

Authority:

Administrative Code, Chapter 2B et seq. (Added by Ordinance No. 37-67; Amended by Ordinances Nos. 110-68, 82-94, 86-96, 393-98, 273-99, and 128-13) and California Revenue and Taxation Code, Section 1620-1630.

Board Qualifications:

The Assessment Appeals Board No. 3 consists of eight (8) members (five (5) regular members. and three (3) alternate members) all appointed by the Board of Supervisors. No person may concurrently hold a seat on more than one of the three Assessment Appeals Boards.

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 California Revenue and Taxation Code, Section 1624.05, as follows: Must have a minimum of five years professional experience in the State of California as one of the following: Certified Public Accountant or Public Accountant; licensed Real Estate Broker; Attorney; or a Property Appraiser accredited by a nationally recognized professional organization, certified by the Office of Real Estate Appraisers, or certified by the State Board of Equalization.

Hearing Officers: The regular and alternate members of the Board shall also serve as hearing 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 have an equal opportunity over time to participate as hearing officers. The Clerk shall designate hearing

San Francisco BOARD OF SUPERVISORS

officers in the following priority order: (1) the regular member of Assessment Appeals Board No. 3; (2) the alternate members of Assessment Appeals Board No. 3; (3) the alternate members of Assessment Appeals Board No. 2; (4) the alternate members of Assessment Appeals Board No. 1; (5) the regular members of Assessment Appeals Board No. 2; and (6) 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. 3 shall have jurisdiction to hear applications for reductions only for property assessed at less than \$50,000,000, excluding applications involving possessory interests or real property located all or in part within Assessor's Block Nos. 1-876 or 3701-3899.

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

Report: Pursuant to California Revenue and Taxation Code, Section 1639, 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.

Sunset Clause: None