

File No. 211231

Committee Item No. 4

Board Item No. 22

# COMMITTEE/BOARD OF SUPERVISORS

## AGENDA PACKET CONTENTS LIST

Committee: Rules Committee

Date Feb 7, 2022

Board of Supervisors Meeting

Date February 15, 2022

### Cmte Board

- Motion
- Resolution
- Ordinance
- Legislative Digest
- Budget and Legislative Analyst Report
- Youth Commission Report
- Introduction Form
- Department/Agency Cover Letter and/or Report
- Memorandum of Understanding (MOU)
- Grant Information Form
- Grant Budget
- Subcontract Budget
- Contract/Agreement
- Form 126 - Ethics Commission
- Award Letter
- Application
- Form 700
- Vacancy Notice
- Information Sheet
- Public Correspondence

### OTHER (Use back side if additional space is needed)

<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
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<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____

Completed by: Victor Young Date Feb 3, 2022

Completed by: \_\_\_\_\_ Date \_\_\_\_\_

1 [Appointment, Treasury Oversight Committee - Nancy Hom]

2

3 **Motion approving the Treasurer’s nomination of Nancy Hom, for a term ending June 17,**  
4 **2022, to the Treasury Oversight Committee.**

5

6 WHEREAS, The Treasury Oversight Committee for the City and County of San  
7 Francisco is established as an advisory body to the Treasurer to involve depositors of funds  
8 into the City Treasury in reviewing investment policies that guide the management of those  
9 funds and to enhance the security and investment return on those funds; and

10 WHEREAS, The Members of the Treasury Oversight Committee are nominated by the  
11 Treasurer and approved or rejected by by the Board of Supervisors; and

12 WHEREAS, Pursuant to Administrative Code, Section 5.9-3, the Treasurer of the City  
13 and County of San Francisco has submitted notification to the Clerk of the Board of  
14 Supervisors of the nomination of Nancy Hom to the Treasury Oversight Committee, received  
15 by the Clerk of the Board on November 23, 2021; now, therefore, be it

16 MOVED, That the Board of Supervisors of the City and County of San Francisco  
17 hereby approves the Treasurer of the City and County of San Francisco’s nomination of  
18 Nancy Hom, seat 4, to the Treasury Oversight Committee, for the unexpired portion of a four-  
19 year term ending June 17, 2022.

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November 23, 2021

Ms. Angela Calvillo  
Clerk of the Board of Supervisors  
1 Dr. Carlton B. Goodlett Place  
City Hall, Room 244

**Re: Nominations for the Treasury Oversight Committee**

Dear Clerk of the Board:

In accordance with the City and County of San Francisco Administrative Code 5.9-3, I hereby nominate the following member to the Treasury Oversight Committee for a term ending June 17, 2022.

Seat 4 – Nancy Hom, Deputy CFO, San Francisco Public Utilities Commission

Please feel free to contact Eric Manke at [eric.manke@sfgov.org](mailto:eric.manke@sfgov.org) if you require additional information.

Sincerely,

José Cisneros  
Treasurer  
City and County of San Francisco

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) 544-5227

Application for Boards, Commissions, Committees, & Task Forces

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

Seat # (see Vacancy Notice for qualifications): 4

Full Name: Nancy L. Hom

Home Address: [Redacted] Zip Code: 94102

Home Phone: [Redacted] Occupation: Deputy CFO

Work Phone: 415-487-5229 Employer: City & County of SF

Business Address: 525 Golden Gate Avenue 4th Fl. Zip Code: 94102

Business Email: nhom@sfgwater.org Home Email: [Redacted]

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.

Check All That Apply:

Resident of San Francisco: Yes [X] No [ ] If No, place of residence: \_\_\_\_\_

18 Years of Age or Older: Yes [X] 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:

I have served the City & County of San Francisco since 2003 as a public servant for the areas of budget, finance, accounting, audits and risk management for the Controller's Office; the Department of Child Support Services and currently - as Deputy Chief Financial Officer at the San Francisco Public Utilities Commission. Supporting these important departments helped me continue growth in my professional skill set, but more importantly - foster a passion for public service through performing work I thoroughly enjoy. I am a champion of efficiency, process, internal control and fiscal stewardship. As public servants, I feel it is our responsibility to be good fiscal stewards of the assets entrusted into our care. I also currently sit on the Controller's Office 1649 Accounting Intern Steering Committee - with an objective to open doors to all whom are interested in public accounting careers. I'm a native San Franciscan who attended K-12 public school, completed my studies at San Francisco State University and began my career in the private sector, in the SF Financial District. My spouse and I have two children, one in college and the youngest entering middle school - both to whom I emphasize the virtues of public and community service. I am committed to serving the City & County of San Francisco and am proud to be a public servant.

(Applications must be submitted to BOS-Appointments@sfgov.org or to the mailing address listed above.)

**Business and/or Professional Experience:**

Deputy Chief Financial Officer, San Francisco Public Utilities Commission (2017 - present)  
Director of Assurance & Internal Controls, San Francisco Public Utilities Commission (2008 - 2019)  
Chief Financial Officer, Department of Child Support Services, 2006 - 2008  
Principal Business & Budget Analyst, Office of the Controller, 2003-2006  
Senior Business Analyst, Gap Inc., 2001-2003  
Senior Financial Analyst, Siebel Systems Inc. (now Oracle), 2000-2001  
Consultant, Deloitte Consulting, 1999-2000  
Consultant, KPMG LLP, 1997 - 1999

**Certifications:**

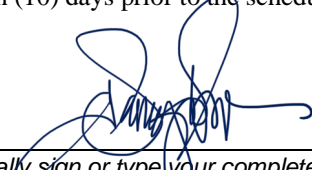
Certified Internal Auditor (CIA) #27299, Institute of Internal Auditors  
Certification in Risk Management Assurance (CRMA) #10643, Institute of Internal Auditors

**Civic Activities:**

Controller's Office 1649 Accounting Intern Steering Committee (2017 - present)  
Supervisory Committee Chair, San Francisco Federal Credit Union (2016 - 2018)

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: 11/09/2021 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

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Hom Nancy Ling

1. Office, Agency, or Court

Agency Name (Do not use acronyms)  
City & County of San Francisco  
Division, Board, Department, District, if applicable Your Position  
Public Utilities Commission Deputy Chief Financial Officer

► 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, 2020, through December 31, 2020.  Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
-or- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_\_, through (Check one circle.)  
 Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
 Candidate: Date of Election \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_  
 The period covered is January 1, 2020, through the date of leaving office.  
-or-  
 The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_\_, through the date of leaving office.

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 4

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)  
525 Golden Gate Avenue, 4th Floor San Francisco CA 94107  
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS  
(415 ) 487-5229 nhom@sfgwater.org

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

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

Date Signed 03/31/2021  
(month, day, year)

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

Print

Clear

# 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.

Name

Nancy L. Hom

▶ NAME OF BUSINESS ENTITY  
Apple, Inc.

GENERAL DESCRIPTION OF THIS BUSINESS  
software, hardware

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:  
 \_\_\_\_\_/\_\_\_\_\_/20      \_\_\_\_\_/\_\_\_\_\_/20  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
Amazon Inc., Shopify Inc.

GENERAL DESCRIPTION OF THIS BUSINESS  
Online marketplace

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:  
 \_\_\_\_\_/\_\_\_\_\_/20      \_\_\_\_\_/\_\_\_\_\_/20  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
ARK Funds - various ETFs

GENERAL DESCRIPTION OF THIS BUSINESS  
ETF stock investments in technology and genomics

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:  
 06/01/20      \_\_\_\_\_/\_\_\_\_\_/20  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
Tesla Inc., NIO Inc., Switchback Energy Inc.

GENERAL DESCRIPTION OF THIS BUSINESS  
Electric vehicle manufacturer and charge points

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:  
 08/01/20      \_\_\_\_\_/\_\_\_\_\_/20  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
Netflix, Inc.

GENERAL DESCRIPTION OF THIS BUSINESS  
Online entertainment streaming provider

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:  
 \_\_\_\_\_/\_\_\_\_\_/20      \_\_\_\_\_/\_\_\_\_\_/20  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
Zoom Inc.

GENERAL DESCRIPTION OF THIS BUSINESS  
Online network meeting service provider

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:  
 04/06/20      \_\_\_\_\_/\_\_\_\_\_/20  
 ACQUIRED                      DISPOSED

Comments: \_\_\_\_\_

**Print**

**Clear**

# SCHEDULE A-2

## Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
Nancy L. Hom

**▶ 1. BUSINESS ENTITY OR TRUST**

Tao Consulting, LLC

Name  
170 Alexander Avenue Daly City, CA 94014

Address (Business Address Acceptable)

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

GENERAL DESCRIPTION OF THIS BUSINESS

---

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:

<input type="checkbox"/> \$0 - \$1,999 <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> ____/____/20 ACQUIRED                 </td> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> ____/____/20 DISPOSED                 </td> </tr> </table>	<input type="checkbox"/> ____/____/20 ACQUIRED	<input type="checkbox"/> ____/____/20 DISPOSED
<input type="checkbox"/> ____/____/20 ACQUIRED	<input type="checkbox"/> ____/____/20 DISPOSED		

NATURE OF INVESTMENT  
 Partnership     Sole Proprietorship     \_\_\_\_\_ Other

YOUR BUSINESS POSITION \_\_\_\_\_

**▶ 1. BUSINESS ENTITY OR TRUST**

Name \_\_\_\_\_

Address (Business Address Acceptable) \_\_\_\_\_

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

GENERAL DESCRIPTION OF THIS BUSINESS

---

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:

<input type="checkbox"/> \$0 - \$1,999 <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> ____/____/20 ACQUIRED                 </td> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> ____/____/20 DISPOSED                 </td> </tr> </table>	<input type="checkbox"/> ____/____/20 ACQUIRED	<input type="checkbox"/> ____/____/20 DISPOSED
<input type="checkbox"/> ____/____/20 ACQUIRED	<input type="checkbox"/> ____/____/20 DISPOSED		

NATURE OF INVESTMENT  
 Partnership     Sole Proprietorship     \_\_\_\_\_ Other

YOUR BUSINESS POSITION \_\_\_\_\_

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

<input type="checkbox"/> \$0 - \$499	<input checked="" type="checkbox"/> \$10,001 - \$100,000
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> OVER \$100,000
<input type="checkbox"/> \$1,001 - \$10,000	

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

<input type="checkbox"/> \$0 - \$499	<input type="checkbox"/> \$10,001 - \$100,000
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> OVER \$100,000
<input type="checkbox"/> \$1,001 - \$10,000	

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

None    or     Names listed below

Amazon, eBay

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

None    or     Names listed below

**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
 INVESTMENT     REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property \_\_\_\_\_

Description of Business Activity or City or Other Precise Location of Real Property \_\_\_\_\_

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:

<input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> ____/____/20 ACQUIRED                 </td> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> ____/____/20 DISPOSED                 </td> </tr> </table>	<input type="checkbox"/> ____/____/20 ACQUIRED	<input type="checkbox"/> ____/____/20 DISPOSED
<input type="checkbox"/> ____/____/20 ACQUIRED	<input type="checkbox"/> ____/____/20 DISPOSED		

NATURE OF INTEREST  
 Property Ownership/Deed of Trust     Stock     Partnership

Leasehold \_\_\_\_\_     Other \_\_\_\_\_  
Yrs. remaining

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

**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
 INVESTMENT     REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property \_\_\_\_\_

Description of Business Activity or City or Other Precise Location of Real Property \_\_\_\_\_

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:

<input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> ____/____/20 ACQUIRED                 </td> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> ____/____/20 DISPOSED                 </td> </tr> </table>	<input type="checkbox"/> ____/____/20 ACQUIRED	<input type="checkbox"/> ____/____/20 DISPOSED
<input type="checkbox"/> ____/____/20 ACQUIRED	<input type="checkbox"/> ____/____/20 DISPOSED		

NATURE OF INTEREST  
 Property Ownership/Deed of Trust     Stock     Partnership

Leasehold \_\_\_\_\_     Other \_\_\_\_\_  
Yrs. remaining

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

Comments: \_\_\_\_\_



# SCHEDULE C

## Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Nancy L. Hom

▶ 1. INCOME RECEIVED
▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME  
Tao Consulting, LLC

ADDRESS *(Business Address Acceptable)*  
170 Alexander Avenue Daly City, CA 94014

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Product logistics and sales

YOUR BUSINESS POSITION  
1% shareholder

GROSS INCOME RECEIVED     No Income - Business Position Only

\$500 - \$1,000                       \$1,001 - \$10,000

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

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

Salary     Spouse's or registered domestic partner's income  
*(For self-employed use Schedule A-2.)*

Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)

Sale of \_\_\_\_\_  
*(Real property, car, boat, etc.)*

Loan repayment

Commission or     Rental Income, list each source of \$10,000 or more

\_\_\_\_\_  
*(Describe)*

Other \_\_\_\_\_  
*(Describe)*

NAME OF SOURCE OF INCOME  
\_\_\_\_\_

ADDRESS *(Business Address Acceptable)*  
\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

YOUR BUSINESS POSITION  
\_\_\_\_\_

GROSS INCOME RECEIVED     No Income - Business Position Only

\$500 - \$1,000                       \$1,001 - \$10,000

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

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

Salary     Spouse's or registered domestic partner's income  
*(For self-employed use Schedule A-2.)*

Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)

Sale of \_\_\_\_\_  
*(Real property, car, boat, etc.)*

Loan repayment

Commission or     Rental Income, list each source of \$10,000 or more

\_\_\_\_\_  
*(Describe)*

Other \_\_\_\_\_  
*(Describe)*

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

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

NAME OF LENDER\* \_\_\_\_\_

ADDRESS *(Business Address Acceptable)* \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD

\$500 - \$1,000

\$1,001 - \$10,000

\$10,001 - \$100,000

OVER \$100,000

INTEREST RATE                      TERM (Months/Years)

\_\_\_\_\_ %     None                      \_\_\_\_\_

SECURITY FOR LOAN

None                       Personal residence

Real Property \_\_\_\_\_  
*Street address*

\_\_\_\_\_ *City*

Guarantor \_\_\_\_\_

Other \_\_\_\_\_  
*(Describe)*

Comments: \_\_\_\_\_



**CERTIFICATION OF COMPLIANCE WITH CALIFORNIA GOVERNMENT CODE FOR THE  
CURRENT FISCAL YEAR**

Please furnish information regarding your compliance with the following California Government Code Sections:

**Section 27132.1 - Member Employment by Campaign Contributors**

A Committee member may not be employed by an entity that had contributed to an election campaign of the Treasurer or a member of the Board of Supervisors in the previous three years.

YES, in compliance.       NO, I am not in compliance.

**Section 27132.2 - Fundraising by Committee Members for County Officials**

A Committee member may not directly or indirectly raise money for the Treasurer or a member of the Board of Supervisors while a member of the Committee.

YES, in compliance.       NO, I am not in compliance.

**Section 27132.3 - Member Employment in the Financial Services Industry**

A Committee member may not secure employment with bond underwriters, bond counsel, security brokerages or dealers, or with financial services firms for three years after leaving the Committee.

YES, in compliance.       NO, I am not in compliance.

Please complete this certification and return to Anna Arevalo in the Treasurer's Office. If you have any questions regarding this matter, please contact Anna at 415-554-7870.

I hereby certify that the information provided above is true and correct.

Signature: \_\_\_\_\_ Date: 11/10/21  
Printed Name: Nancy Hom  
Member, San Francisco Treasury Oversight Committee



November 17, 2021

To: Angela Calvillo, Clerk of the Board  
 From: Dennis Herrera, General Manager *DJH*  
 CC: Honorable Supervisor Ahsha Safai  
 Honorable Supervisor Norman Yee  
 Honorable Supervisor Catherine Stefani  
 Re: Appointment of Nancy Hom to Treasury Oversight Committee

I write to express my support for the appointment of Nancy Hom as a representative on the Treasury Oversight Committee. Ms. Hom is the Deputy Chief Financial Officer for the San Francisco Public Utilities Commission (SFPUC) and reports to the Assistant General Manager of Business Services & Chief Financial Officer. She is being considered for the seat previously held by Eric Sandler, AGM Business Services & CFO of the SFPUC. I believe Ms. Hom's role in Finance will allow for continuity and effective representation.

Additionally, Ms. Hom has many qualifications that enable her to successfully represent San Francisco in this post. Ms. Hom retains a Bachelor of Business Administration with concentrations in Finance and Internal Audit from California State University, San Francisco (SFSU); a Project Management Certificate from SFSU; and from the Institute of Internal Auditors, two certifications as a Certified Internal Auditor and Certification in Risk Management Assurance. Her extensive career in finance and audit began in KPMG LLP's Management Assurance Services practice and continued in the technology sector in corporate finance. Since 2003, she has focused in municipal financial management in the areas of budgeting, accounting, financial reporting, audits, internal control and risk management – supporting the Controller's Office; Child Support Services; and the last 13 years at the SFPUC. She is currently responsible for the accurate, complete, and timely accounting and financial reporting of SFPUC's \$1.5 billion operating and \$700 million capital budgets.

Ms. Hom is a native San Franciscan and longtime resident; and enjoys supporting local initiatives – specifically those benefitting young children and adults in the areas of education, early career development and overall wellness. She has also volunteered as the Supervisory Committee Chair of the San Francisco Federal Credit Union (2016-2018), overseeing governance, internal control, cost efficiency of the credit union's operational activities.

I whole heartedly support Nancy's nomination for this role and encourage you to appoint her to represent San Francisco as a member of the Treasury Oversight Committee.

- London N. Breed**  
Mayor
- Anson Moran**  
President
- Newsha Ajami**  
Vice President
- Sophie Maxwell**  
Commissioner
- Tim Paulson**  
Commissioner
- Ed Harrington**  
Commissioner
- Dennis J. Herrera**  
General Manager

