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Board of Supervisors
City and County of San Francisco
1 Dr. Carlton B. Goodlett Place, Room 244
(415) 554-5184 FAX (415) 554-7714

Application for Boards, Commissions, Committees, & Task Forces

Name of Board, Commission, Committee, or Task Force: Eastern Neighborhoods CAC

Seat # or Category (If applicable): Seat 1 District: 10

Name: Nathan Mee

[redacted] St. Zip: 94107

[redacted]: Attorney

Work Phone: _____ Employer: Nimble Holdings LLC

Business Address: 1100 Gorgas Ave A4900, SF, CA Zip: 94129

Business E-Mail: _____ Home E-Mail: [redacted]

Pursuant to Charter Section 4.101 (a)2, Boards and Commissions established by the Charter must consist of electors (registered voters) of the City and County of San Francisco. For certain other bodies, the Board of Supervisors can waive the residency requirement.

Check All That Apply:

Registered voter in San Francisco: Yes ☑ No ☐ If No, where registered: _____

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

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 am a resident of Potrero Hill and an active member of the community, including serving on the board of the Potrero Boosters and working with the Dogpatch Neighborhood Association on local transportation matters.

Business and/or professional experience:

I have been a practicing attorney for 12 years and have extensive experience in regulation, compliance and transactional law.

Civic Activities:

Member of the executive committee of the Potrero Boosters
Member of the Boosters & DNA joint livable streets committee
Former member of the RABCWG

Have you attended any meetings of the Board/Commission to which you wish appointment? Yes ☑ No ☐

For appointments by the Board of Supervisors, appearance before the RULES COMMITTEE is a requirement before any appointment can be made. *(Applications must be received 10 days before the scheduled hearing.)*

Date: 6/30/22 **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 Seat was Vacated: _____