

File Nos. 101516 Committee Item Nos. 9
Board Item No. _____

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Rules Date January 3, 2011

Board of Supervisors Meeting Date _____

Cmte Board

<input type="checkbox"/>	<input type="checkbox"/>	Motion
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Resolution
<input type="checkbox"/>	<input type="checkbox"/>	Ordinance
<input type="checkbox"/>	<input type="checkbox"/>	Legislative Digest
<input type="checkbox"/>	<input type="checkbox"/>	Budget Analyst Report
<input type="checkbox"/>	<input type="checkbox"/>	Legislative Analyst Report
<input type="checkbox"/>	<input type="checkbox"/>	Youth Commission Report
<input type="checkbox"/>	<input type="checkbox"/>	Introduction Form (for hearings)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Department/Agency Cover Letter and/or Report
<input type="checkbox"/>	<input type="checkbox"/>	MOU
<input type="checkbox"/>	<input type="checkbox"/>	Grant Information Form
<input type="checkbox"/>	<input type="checkbox"/>	Grant Budget
<input type="checkbox"/>	<input type="checkbox"/>	Subcontract Budget
<input type="checkbox"/>	<input type="checkbox"/>	Contract/Agreement
<input type="checkbox"/>	<input type="checkbox"/>	Form 126 – Ethics Commission
<input type="checkbox"/>	<input type="checkbox"/>	Award Letter
<input type="checkbox"/>	<input type="checkbox"/>	Application
<input type="checkbox"/>	<input type="checkbox"/>	Public Correspondence

OTHER

(Use back side if additional space is needed)

<input checked="" type="checkbox"/>	<input type="checkbox"/>	Notice of Appointment
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Biography / Resume
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Form 700
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____

Completed by: Alisa Somera Date December 23, 2010
Completed by: _____ Date _____

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

1 [Confirming Appointments, San Francisco Relocation Appeals Board - Harry Kim and Herb
2 Cohn]

3 **Resolution confirming the appointments of Harry Kim and Herb Cohn to the San**
4 **Francisco Relocation Appeals Board, terms ending January 2, 2012.**

5
6 **RESOLVED**, That the Board of Supervisors of the City and County of San Francisco
7 does hereby confirm the appointment by the Mayor of the following designated persons as
8 members of the San Francisco Relocation Appeals Board pursuant to Administrative Code
9 §§24.7,24B.1(b) for the term specified:

10
11 Harry Kim reappointed to the same seat for the unexpired portion of a three-year term
12 ending January 2, 2012.

13
14 Herb Cohn to fill the seat previously held by Carlos Borromeo for the unexpired portion
15 of a three-year term ending January 2, 2012.



Orig: Joy
C: BOS-11, COB, Leg, Dep
City Atty, Rules Clerk
GAVIN NEWSOM *File*
page

Notice of Appointment

November 29, 2010

File 10/5/16

RECEIVED
BOARD OF SUPERVISORS
SAN FRANCISCO
2010 DEC -1 PM 3:11
BY *W*

Honorable Board of Supervisors:

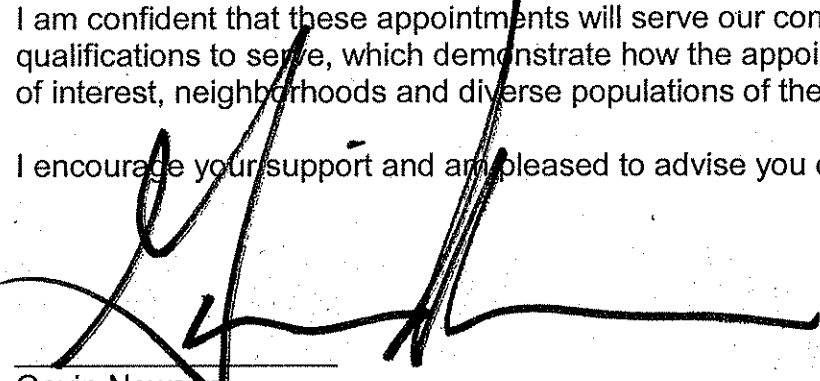
Pursuant to Administrative Code §§24.7, 24B.1(b), I hereby nominate Harry Kim and Herb Cohn to the San Francisco Relocation Appeals Board.

Harry Kim is nominated for reappointment to the same seat for the unexpired portion of a three-year term ending January 2, 2012.

Herb Cohn is nominated to fill the seat previously held by Carlos Borromeo for the unexpired portion of a three-year term ending January 2, 2012.

I am confident that these appointments will serve our community well. Attached are their qualifications to serve, which demonstrate how the appointments represent the communities of interest, neighborhoods and diverse populations of the City and County of San Francisco.

I encourage your support and am pleased to advise you of this appointment.


Gavin Newsom
Mayor

OFFICE OF THE MAYOR
SAN FRANCISCO



GAVIN NEWSOM

November 29, 2010

Angela Calvillo
Clerk of the Board
San Francisco Board of Supervisors
City Hall, Room 244
1 Carlton B. Goodlett Place
San Francisco, California 94102

RECEIVED
BOARD OF SUPERVISORS
SAN FRANCISCO
2010 DEC - 1 PM 3:12
BY *W*

Dear Ms. Calvillo:

Pursuant to Administrative Code §§24.7, 24B.1(b), I hereby nominate Harry Kim, and Herb Cohn to the San Francisco Relocation Appeals Board.

Harry Kim is nominated for reappointment to the same seat for the unexpired portion of a three-year term ending January 2, 2012.

Herb Cohn is nominated to fill the seat previously held by Carlos Borromeo for the unexpired portion of a three-year term ending January 2, 2012.

Please see the attached resumes which will illustrate the appointees' qualifications allow them to represent the communities of interest, neighborhoods and diverse populations of the City and County.

Should you have any questions, please contact my Director of Appointments, Matthew Goudeau at 415-554-6674.

Sincerely,

Gavin Newsom
Mayor

A large, stylized handwritten signature in black ink, which appears to be "Gavin Newsom", written over the printed name and title.

Herbert S. Cohn CPA
Seventeenth Street
San Francisco, CA 94114
Voice 415-
Fax 415-
herbcohn@

Raised in Beachwood, Ohio

**Attended Independent College Preparatory School Hawken School,
one of four Cleveland area independent schools comprising the
Cleveland Council of Independent Schools**

**Graduated Summa Cum Laude from Golden Gate University with a BS
in Accounting**

**Worked for 6 years at a mid-size San Francisco CPA firm, then called
Bailey, Kokjer, and Berry**

**Started my own company in 1985, and still maintain my accounting
practice**

**Served on the Board of Directors of Congregation Sha'ar Zahav as
Treasurer**

**Served on the Board of Directors of Theatre Rhinoceros for 12 years,
including stints as Treasurer and President.**

**Served on the Board of Directors of the Eureka Valley Promotion
Association as Treasurer.**

**Member of the Founding Committee of the Castro's Pink Triangle
Park, overseeing it's creation.**

**Have served on the Board of Directors of the Merchants of Upper
Market and Castro since 1998 as both Treasurer and President.**

**While I was MUMC's President, was one of the founders of the
Castro/Upper Market Community Benefit District and served as it's
initial Board President. I continue on the Board as Treasurer.**

**Served as Treasurer for both campaigns for San Francisco Supervisor
Bevan Dufty as well as currently serve as Treasurer for Supervisor
Dufty's campaign for Mayor of San Francisco.**

Currently serve as President of the San Francisco Council of District Merchant Associations.

Currently serve on the Advisory Board of Sterling Bank.

Currently own and manage two commercial properties in Palm Springs, California..... an industrial warehouse facility and an office building.

DEC/21/2010/TUE 16:22

7 LA. HOA

FAX No. 760 328 155

P. 001

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

 Date Received
 Official Use Only

A Public Document

Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER		
Cohn	Herbert	S	(415) 621-6637		
MAILING ADDRESS <small>(Business Address Acceptable)</small>	STREET	CITY	STATE	ZIP CODE	OPTIONAL: E-MAIL ADDRESS
4077	Seventeenth Street	San Francisco	CA	94114	herbcohn@padbell.net

1. Office, Agency, or Court

Name of Office, Agency, or Court:

Relocation Appeals Board

Division, Board, District, if applicable:

San Francisco

Your Position:

Commissioner

 ▶ If filing for multiple positions, list additional agency(ies)/
 position(s). (Attach a separate sheet if necessary.)

Agency: _____

Position: _____

2. Jurisdiction of Office (Check at least one box)☐ State☒ County of San Francisco☒ City of San Francisco☐ Multi-County _____☐ Other _____**3. Type of Statement (Check at least one box)**☒ Assuming Office/Initial Date: 12/17/10
☐ Annual: The period covered is January 1, 2009,
 through December 31, 2009.

-or-

☐ The period covered is ____/____/____, through
 December 31, 2009.

☐ Leaving Office Date Left: ____/____/____
 (Check one)

☐ The period covered is January 1, 2009, through the
 date of leaving office.

-or-

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

☐ Candidate Election Year: _____
4. Schedule Summary
 ▶ Total number of pages
 including this cover page: 7

 ▶ Check applicable schedules or "No reportable
 interests."
I have disclosed interests on one or more of the
attached schedules:
 Schedule A-1 ☒ Yes - schedule attached
Investments (Less than 10% Ownership)

 Schedule A-2 ☐ Yes - schedule attached
Investments (10% or Greater Ownership)

 Schedule B ☒ Yes - schedule attached
Real Property

 Schedule C ☒ Yes - schedule attached
*Income, Loans, & Business Positions (Income Other than Gifts
 and Travel Payments)*

 Schedule D ☐ Yes - schedule attached
Income - Gifts

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

-or-

☐ No reportable interests on any schedule
5. Verification
 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 certify under penalty of perjury under the laws of the State
 of California that the foregoing is true and correct.

 Date Signed: 12/17/10
 (month, day, year)

 Signature: Herbert S. Cohn
 (File the originally signed statement with your filing official.)

DEC/21/2010/TUE 16:22

7 LF. HOA

FAX No. 760 328 5555

P. 002

SCHEDULE A-1 Investments

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

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Herbert S. Cohn

NAME OF BUSINESS ENTITY
Allstate Corporation

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Firmware

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

IF APPLICABLE, LIST DATE:
 _____/_____/09 _____/_____/09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
Cisco Systems

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Info technology

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

IF APPLICABLE, LIST DATE:
 _____/_____/09 _____/_____/09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
Constellation Brands

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Consumer Staples

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

IF APPLICABLE, LIST DATE:
 _____/_____/09 _____/_____/09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
Darden Restaurants

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Consumer Discretionary

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

IF APPLICABLE, LIST DATE:
 _____/_____/09 _____/_____/09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
Freeport McMoran

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Materials

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

IF APPLICABLE, LIST DATE:
 _____/_____/09 _____/_____/09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
IBM

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Info technology

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

IF APPLICABLE, LIST DATE:
 _____/_____/09 _____/_____/09
 ACQUIRED DISPOSED

Comments: _____

DEC/21/2010/TUE 16:22

7 LA J HOA

FAX No. 760 328 5555

P. 003

SCHEDULE A-1 Investments

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

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name <u>Herbert S. Cohn</u>

NAME OF BUSINESS ENTITY <u>Johnson & Johnson</u> GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Health care</u> FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> Over \$1,000,000 NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="checkbox"/> Income of \$0 - \$500 <input type="checkbox"/> Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: _____ / _____ / 09 ACQUIRED DISPOSED
--

NAME OF BUSINESS ENTITY <u>JP Morgan Chase</u> GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Financials</u> FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> Over \$1,000,000 NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="checkbox"/> Income of \$0 - \$500 <input type="checkbox"/> Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: _____ / _____ / 09 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY <u>Kohls Corp</u> GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Consumer Discretionary</u> FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> Over \$1,000,000 NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="checkbox"/> Income of \$0 - \$500 <input type="checkbox"/> Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: _____ / _____ / 09 ACQUIRED DISPOSED
--

NAME OF BUSINESS ENTITY <u>medtronic</u> GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Health care</u> FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> Over \$1,000,000 NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="checkbox"/> Income of \$0 - \$500 <input type="checkbox"/> Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: _____ / _____ / 09 ACQUIRED DISPOSED
--

NAME OF BUSINESS ENTITY <u>Oracle</u> GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Info technology</u> FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> Over \$1,000,000 NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="checkbox"/> Income of \$0 - \$500 <input type="checkbox"/> Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: _____ / _____ / 09 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY <u>Procter & Gamble</u> GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Consumer Staples</u> FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> Over \$1,000,000 NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="checkbox"/> Income of \$0 - \$500 <input type="checkbox"/> Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: _____ / _____ / 09 ACQUIRED DISPOSED
--

Comments:

DEC/21/2010/TUE 16:22

7 LA HOA

FAX No. 760 328 1115

P. 004

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Herbert S. Cohn

<p>NAME OF BUSINESS ENTITY <u>Verizon Communications</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Telecommunication</u></p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> Over \$1,000,000 </p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income of \$0 - \$500 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C) </p> <p>IF APPLICABLE, LIST DATE: _____ / _____ / 09 ACQUIRED DISPOSED </p>	<p>NAME OF BUSINESS ENTITY <u>Alcoa</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>materials</u></p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> Over \$1,000,000 </p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock <input checked="" type="checkbox"/> Other <u>bond</u> (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income of \$0 - \$500 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C) </p> <p>IF APPLICABLE, LIST DATE: _____ / _____ / 09 ACQUIRED DISPOSED </p>
<p>NAME OF BUSINESS ENTITY <u>Avery Dennison</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>materials</u></p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> Over \$1,000,000 </p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock <input checked="" type="checkbox"/> Other <u>bond</u> (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income of \$0 - \$500 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C) </p> <p>IF APPLICABLE, LIST DATE: _____ / _____ / 09 ACQUIRED DISPOSED </p>	<p>NAME OF BUSINESS ENTITY <u>Caterpillar Financial</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Capital goods</u></p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> Over \$1,000,000 </p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock <input checked="" type="checkbox"/> Other <u>bond</u> (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income of \$0 - \$500 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C) </p> <p>IF APPLICABLE, LIST DATE: _____ / _____ / 09 ACQUIRED DISPOSED </p>
<p>NAME OF BUSINESS ENTITY <u>General Electric</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Capital goods</u></p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> Over \$1,000,000 </p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock <input checked="" type="checkbox"/> Other <u>bond</u> (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income of \$0 - \$500 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C) </p> <p>IF APPLICABLE, LIST DATE: _____ / _____ / 09 ACQUIRED DISPOSED </p>	<p>NAME OF BUSINESS ENTITY <u>Nextel Communications</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Telecommunication</u></p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> Over \$1,000,000 </p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock <input checked="" type="checkbox"/> Other <u>bond</u> (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income of \$0 - \$500 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C) </p> <p>IF APPLICABLE, LIST DATE: _____ / _____ / 09 ACQUIRED DISPOSED </p>

Comments:

DEC/21/2010/TUE 16:23

7 Lf. HOA

FAX No. 760 328 3335

P. 005

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest Is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Herbert S.ohn

NAME OF BUSINESS ENTITY
Wendys International

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Consumer Discretionary

FAIR MARKET VALUE
☐ \$2,000 - \$10,000
☐ \$100,001 - \$1,000,000
☒ \$10,001 - \$100,000
☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock
☒ Other Bond
 (Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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

NATURE OF INVESTMENT
☐ Stock
☐ Other
 (Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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

NATURE OF INVESTMENT
☐ Stock
☐ Other
 (Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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

NATURE OF INVESTMENT
☐ Stock
☐ Other
 (Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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

NATURE OF INVESTMENT
☐ Stock
☐ Other
 (Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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

NATURE OF INVESTMENT
☐ Stock
☐ Other
 (Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 09
 ACQUIRED DISPOSED

Comments:

DEC/21/2010/TUE 16:23

7 LA HOA

FAX No. 760 328 5555

P. 006

SCHEDULE B **Interests in Real Property** (Including Rental Income)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Herbert S. Cohn

STREET ADDRESS OR PRECISE LOCATION

4079 Seventeenth Street

CITY

San Francisco CA 94114

FAIR MARKET VALUE

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

IF APPLICABLE, LIST DATE:

 / 09 / 09
ACQUIRED / 09 / 09
DISPOSED

NATURE OF INTEREST

☒ Ownership/Deed of Trust☐ Easement☐ Leasehold

Yrs. remaining

☐

Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

☐ \$0 - \$499☐ \$500 - \$1,000☐ \$1,001 - \$10,000☒ \$10,001 - \$100,000☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

Robert Baham

STREET ADDRESS OR PRECISE LOCATION

CITY

FAIR MARKET VALUE

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

IF APPLICABLE, LIST DATE:

 / 09 / 09
ACQUIRED / 09 / 09
DISPOSED

NATURE OF INTEREST

☐ Ownership/Deed of Trust☐ Easement☐ Leasehold

Yrs. remaining

☐

Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

☐ \$0 - \$499☐ \$500 - \$1,000☐ \$1,001 - \$10,000☐ \$10,001 - \$100,000☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

 % ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000☐ \$1,001 - \$10,000☐ \$10,001 - \$100,000☐ OVER \$100,000☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

 % ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000☐ \$1,001 - \$10,000☐ \$10,001 - \$100,000☐ OVER \$100,000☐ Guarantor, if applicable

Comments:

DEC/21/2010/TUE 16:23

7 Lk J HOA

FAX No. 760 328 5555

P. 007

Noki: I have a few clients who pay me more than \$500 for my services, but the vast majority pay me less than \$500. I am currently out of the office and don't have access to my client list, but they would all be individuals, not companies.

SCHEDULE C **Income, Loans, & Business Positions**

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Herbert S. Cohn

I can provide a detailed list of clients paying over \$500 when I return to San Francisco

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

Accounting practice - sole proprietorship

ADDRESS (Business Address Acceptable)

4077 Seventeenth Street SF CA 94114

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

Owner

GROSS INCOME RECEIVED

- ☒ \$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
☐ Loan repayment
☐ Sale of _____
(Property, car, boat, etc.)
☐ Commission or ☐ Rental income, list each source of \$10,000 or more

☒ Other Accounting fees
(Describe)

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

- ☐ Salary ☐ Spouse's or registered domestic partner's income
☐ Loan repayment
☐ Sale of _____
(Property, car, boat, etc.)
☐ Commission or ☐ Rental income, list each source of \$10,000 or more

☐ Other _____
(Describe)

2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of 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

_____ % ☐ None

TERM (Months/Years)

SECURITY FOR LOAN

- ☐ None ☐ Personal residence

☐ Real Property _____
Street address

City

☐ Guarantor _____

☐ Other _____
(Describe)

Comments: _____

Harry W. Kim Corona Street, San Francisco, CA 94127
Tele: 415- Mobile: 415- E-Mail – webkim8282@

// harrykim@

COMMUNITY SERVICE

Commissioner, San Francisco Relocation Appeals Board
Chairman, San Francisco-Seoul Sister City Committee
Director, Golden Gate Bridge, Highway & Transportation District (1988-1992)
San Francisco Mayoral Transition Team (Mayor Newsom 2004)
Board of Governors, Fisherman's Wharf Association (1979-2004)
Mayor's Commissioner Selecting Committee (1987)/ Coordinator,
Mayor's Economic Mission to Asia (1989 & 1992)
Director, SF Convention and Visitors Bureau (2term) /// 1988 Seoul Olympic SF Representative

PROFESSIONAL EXPERIENCE AND ASSOCIATIONS

CEO, U.S.-Korea Trade Associates (1990-2009)
Owner & President, Golden Sea Fisheries Co., Pier 45 San Francisco (1978-1993)
Mechanical Service Advisor & Supervisor, Saltnes Volkswagen San Francisco (1971-1978)
Publisher, San Francisco Book for Korean Visitors (1990 & 1992)
Lecturer, Pohang University, Korea (in Local Government System, Globalism & Transportation)
Owner, Golden Gate Café at Cathedral Hill Hotel (1995-2001)
Former Advisor to Bechtel Engineering for ROK High Speed Rail Transit Management Training
Advisor to Korean American Chamber of Commerce
Member, Golden Gate Breakfast Club, Commonwealth Club, Ingleside Homeowners Association
Former Member, San Francisco Fisherman's Wharf Rotary Club
Grand Marshal, San Francisco U.S. Veterans Day Parade 2003
Co-Chair, Korean American Friendship Society (1991-1998 with President of USF)
Former member - International Bridge, Tunnel, Turnpike and Transportation Association
U.S. Navy league Life Member & Former Board of Director and Member of Marine Corps League
Managing Director, Hotel Shilla SF 1994 till year 2000
Military Service: Served 7 Years ROK Navy Communication and Security

EDUCATION

Bailey Technical College, St. Louis MO (Mechanical Engineering)
Hanyang University, Korea (Architectural Studies),- Washington U

LANGUAGES

Fluent in English, Korean, and some Japanese; read & write Chinese

SPECIAL CREDENTIALS/ACHIEVEMENTS

Numerous awards for Community Service
Extensive background and experience in Government & Public Relations
Expertise in the areas of Emergency & Disaster Preparedness and Transportation
Extensive background in business development and strategy consulting
Consulted with major law firms, businesses, and trade associations
Recognized internationally as a business leader, facilitator and educator
Professionally oriented mechanical skills
Excellent organizational, time management and leadership skills
Able to make intelligent and quick business decisions and deal effectively with individuals at all levels

COVER PAGE

A Public Document

Please type or print in ink.

NAME (LAST) KIM	(FIRST) HARRY	(MIDDLE) WON	DAYTIME TELEPHONE NUMBER (415) 722-5566
MAILING ADDRESS (Business Address Acceptable) 25 CORONA ST, SF	STREET CA	CITY 94127	STATE ZIP CODE
OPTIONAL: E-MAIL ADDRESS WEBKIM8282@YAHOO.COM			

1. Office, Agency, or Court

Name of Office, Agency, or Court:

Division, Board, District, if applicable:

Your Position:

► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency:

Position:

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

☐ State

☐ County of _____

☐ City of _____

☐ Multi-County _____

☐ Other _____

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

☐ Assuming Office/Initial

Date: ____/____/____

☐ Annual: The period covered is January 1, 2009, through December 31, 2009.

-or-

☐ The period covered is ____/____/____, through December 31, 2009.

☐ Leaving Office (Check one)

Date Left: ____/____/____

☐ The period covered is January 1, 2009, through the date of leaving office.

-or-

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

☐ Candidate

Election Year: _____

4. Schedule Summary

► Total number of pages including this cover page: _____

► Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 ☐ Yes - schedule attached
Investments (Less than 10% Ownership)

Schedule A-2 ☐ Yes - schedule attached
Investments (10% or Greater Ownership)

Schedule B ☐ Yes - schedule attached
Real Property

Schedule C ☐ Yes - schedule attached
Income, Loans, & Business Positions (Income Other than and Travel Payments)

Schedule D ☐ Yes - schedule attached
Income - Gifts

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

-or-

☒ No reportable interests on any schedule

5. Verification

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

Date Signed

SEP 9, 2010
(month, day, year)

Signature

Harry W. Y. Li
(File the originally signed statement with your filing official.)

RECEIVED
BOARD OF SUPERVISORS
SAN FRANCISCO
2010 SEP -9 PM 2:39

San Francisco
BOARD OF SUPERVISORS

Date Printed: December 23, 2010

Date Established: November 14, 1972

Active

RELOCATION APPEALS BOARD

Contact and Address:

Eugene Flannery
Relocation Appeals Board, c/o MOCD
1 South Van Ness Avenue, 5th Floor
San Francisco, CA 94103

Phone: (415) 701-5598

Fax: (415) 701-5502

Email: Eugene.Flannery@sfgov.org

Authority:

Added by Ordinance 333-72; amended by Ordinance 25-00. Health & Safety Code Section 33417.5; Administrative Code Section 24.7 & 24B.

Board Qualifications:

The Relocation Appeals Board consists of five members appointed by the Mayor and approved by the Board of Supervisors.

The Board's responsibilities include hearing all complaints brought by residents of the various project areas relating to relocation and shall determine if the Redevelopment Agency has complied with the provisions of Chapter 4 of the California Health and Safety Code, and, where applicable, federal regulations. The Board after a public hearing, shall transmit its findings and recommendations to the Agency. In addition, study, investigate and hold hearings on grievances and disputes arising between displacing agency or any agency responsible for providing relocation services, and a relocate who is dissatisfied with the relocation services; require agencies to investigate grievances upon request of the Board and submit reports of investigations to the Board; mediate disputes between displacing agency or agency responsible for providing relocation services and aggrieved party when requested to do so by aggrieved party; and issue rules and regulations for the conduct of its own affairs.

Sunset Date: None

Reports: None referenced.

