

### STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

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Ple	ease type or print in ink.						
NAI	ME OF FILER (LAST)	(FIRST)			(MIDDLE)		
E	ppler	Jeffers	on		Robert		
1.	Office, Agency, or 0	Court					
	Agency Name (Do not use	e acronyms)					
	Board of Appeals						
	Division, Board, Departmen	t, District, if applicable		Your Posit	ion		
				Comm	ssioner		
	► If filing for multiple posit	ions, list below or on an attachmen	nt. (Do not use	e acronyms)			
	Agency:			Position:			
<del>_</del> 2.	Jurisdiction of Offi	Ce (Check at least one box)					
	State				Retired Judge, Pro Tem Jud le Jurisdiction)	dge, or Court Commissioner	
	Multi-County			County of	San Francisco		
	City of San Francis	SCO SCO		Other			
3.	Type of Statement	(Check at least one box)					
	December 3	covered is January 1, <b>2021,</b> through 1, <b>2021</b> .	า	Leaving	g Office: Date Left (Check one		
	-or- The period of December 3	covered is//	, through		period covered is January ing office.	1, <b>2021</b> , through the date of	of
	Assuming Office: Da	ate assumed $9 / 20$	22	☐ The	period covered is/_date of leaving office.	, throug	h
	Candidate: Date of E	Election and	d office sought,	, if different than F	Part 1:		
4.	Schedule Summary		tal number	of pages incl	uding this cover pag	re:	
	Schedules attach	ed					
	Schedule A-1 - Inv	restments - schedule attached		=	,	Positions - schedule attache	ed
	Schedule A-2 - Inv	restments - schedule attached		<u> </u>	ncome – Gifts – schedule a		
	Schedule B - Real	Property – schedule attached	L	Schedule E - Ir	ncome – Gifts – Travel Pay	ments – schedule attached	
-(	or- 🗆 None - No re	portable interests on any sch	edule				
5.	Verification						
	MAILING ADDRESS (Business or Agency Address Red	STREET	CITY		STATE	ZIP CODE	
	1459 18th Street, #		San Fr	rancisco	CA	94107	
	DAYTIME TELEPHONE NUMBER			EMAIL ADDRESS			
	( 415 ) 574-0775			jr.eppler@st	gov.org		
		diligence in preparing this statemer schedules is true and complete.				wledge the information conta	ained
	I certify under penalty of	perjury under the laws of the St	ate of Californ	nia that the foreg	oing is true and correct.		
	Data Cinnad	ptember 14, 2022	•	!			
_	Date Signed Se	(month, day, year)		ignature	(File the originally signed paper states	ment with your filing official.)	

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.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Jefferson R. Eppler

<b></b>	NAME OF BUSINESS ENTITY	<b></b>	NAME OF BUSINESS ENTITY
	Robinhood Markets, Inc.		
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS
	On-line stock brokerage		
	FAIR MARKET VALUE		FAIR MARKET VALUE
	\$2,000 - \$10,000		\$2,000 - \$10,000
	\$100,001 - \$1,000,000 Over \$1,000,000		\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT		NATURE OF INVESTMENT
	Stock Other (Describe)		Stock Other (Describe)
	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)		Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
	<u>/ /2 / /21</u> //21_		// <u>21</u>
_	ACQUIRED DISPOSED		ACQUIRED DISPOSED
•	NAME OF BUSINESS ENTITY	•	NAME OF BUSINESS ENTITY
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS
	FAIR MARKET VALUE		FAIR MARKET VALUE
	\$2,000 - \$10,000		\$2,000 - \$10,000 \qquad \$10,001 - \$100,000
	\$100,001 - \$1,000,000 Over \$1,000,000		\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT		NATURE OF INVESTMENT
	Stock Other		Stock Other
	(Describe)  ☐ Partnership ☐ Income Received of \$0 - \$499		(Describe)  Partnership Income Received of \$0 - \$499
	☐ Income Received of \$500 or More (Report on Schedule C)		Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
	//21		//21
	ACQUIRED DISPOSED		ACQUIRED DISPOSED
<u> </u>	NAME OF BUSINESS ENTITY	<b> </b>	NAME OF BUSINESS ENTITY
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS
	EAID MADVET VALUE		EAID MADVET VALUE
	FAIR MARKET VALUE  \$2,000 - \$10,000 \$10,001 - \$100,000		FAIR MARKET VALUE  \$2,000 - \$10,000 \$10,001 - \$100,000
	\$100,001 - \$1,000,000 Over \$1,000,000		\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT		NATURE OF INVESTMENT
	Stock Other		Stock Other
	(Describe)  Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)		(Describe)  Partnership Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
	/ /21 / /21		/ /21 / /21
	ACQUIRED DISPOSED		ACQUIRED DISPOSED
	'	1	

Comments: .

## **SCHEDULE A-2** Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION Name

Jefferson R. Eppler

▶ 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
Eppler Legal, Inc.	
Name	Name
1459 18th Street, #345, San Francisco, CA 94107	
Address (Business Address Acceptable) Check one	Address (Business Address Acceptable) Check one
Trust, go to 2 Business Entity, complete the box, then go to 2	☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Legal and business consulting service provider	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$0 - \$1,999	\$0 - \$1,999
\$2,000 - \$10,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000	\$100,001 - \$1,000,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INVESTMENT Corporation	NATURE OF INVESTMENT
Partnership Sole Proprietorship Other	Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION Director/Officer/Employee	YOUR BUSINESS POSITION
► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
\$0 - \$499 \$10,001 - \$100,000	\$0 - \$499 \$10,001 - \$100,000
\$500 - \$1,000 OVER \$100,000	\$50 - \$499
\$1,001 - \$10,000	\$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.)	➤ 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	None or Names listed below
United Pacific Hotel Group, L.P., Rothenberg Ventures	
LLC; Heisenberg Matrix Development Inc.; RedThread	
Research Inc.	
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED <u>BY</u> THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED <u>BY</u> THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
N/A	
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000//21//21
\$10,001 - \$1,000,000	\$100,001 - \$100,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST    Property Overschip/Doed of Trust   Stock   Restourchip	NATURE OF INTEREST  Property Overschip/Deed of Trust  Steek  Rettership
Property Ownership/Deed of Trust Stock Partnership	Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached

Comments: .

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

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION Name

Jefferson R. Eppler

<b>&gt;</b>	ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	▎┡	ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
	CITY		CITY
	FAIR MARKET VALUE   S2,000 - \$10,000   \$100,001 - \$100,000   \$100,001 - \$1,000,000   \$10		FAIR MARKET VALUE   \$2,000 - \$10,000   \$10,001 - \$100,000   ACQUIRED   DISPOSED
*	You are not required to report loans from a commercial business on terms available to members of the public loans received not in a lender's regular course of business.	with	out regard to your official status. Personal loans and
	NAME OF LENDER*		NAME OF LENDER*
	ADDRESS (Business Address Acceptable)		ADDRESS (Business Address Acceptable)
	BUSINESS ACTIVITY, IF ANY, OF LENDER		BUSINESS ACTIVITY, IF ANY, OF LENDER
	INTEREST RATE TERM (Months/Years)% None		INTEREST RATE TERM (Months/Years) % None
	HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000  \$1,001 - \$10,000  \$1,001 - \$100,000  OVER \$100,000		HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000  \$1,001 - \$10,000  \$10,001 - \$100,000  OVER \$100,000
	Guarantor, if applicable		Guarantor, if applicable
		11	

## SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Jefferson R. Eppler

1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION	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	GROSS INCOME RECEIVED No Income - Business Position Onl \$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.)	(For self-employed use Schedule A-2.)  Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
Sale of	Sale of
(Describe)  Other(Describe)	(Describe)  Other(Describe)
a retail installment or credit card transaction, made in	al lending institution, or any indebtedness created as part of the lender's regular course of business on terms available il status. Personal loans and loans received not in a lender' ws:  INTEREST RATE  TERM (Months/Years)
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	City  Guarantor
OVER \$100,000	Other(Describe)
Comments:	

## SCHEDULE D Income - Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Jefferson R. Eppler

NAME OF SOURCE (Not an Seth Acharya	Acronym)	► NAME OF SOURCE (Not an A	cronym)
ADDRESS (Business Address		ADDRESS (Business Address A	Acceptable)
BUSINESS ACTIVITY, IF AN	r, of source	BUSINESS ACTIVITY, IF ANY,	OF SOURCE
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)
11 2 21 330	2 Game Tickets+ Parki	\$	
/\$		/\$	
		\$	
NAME OF SOURCE (Not an	Acronym)	► NAME OF SOURCE (Not an A	cronym)
ADDRESS (Business Address	Acceptable)	ADDRESS (Business Address A	Acceptable)
BUSINESS ACTIVITY, IF AN	Y, OF SOURCE	BUSINESS ACTIVITY, IF ANY,	OF SOURCE
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)
/\$		/ \$	
/\$		\$	
		\$	
NAME OF SOURCE (Not an	Acronym)	► NAME OF SOURCE (Not an A	cronym)
ADDRESS (Business Address	Acceptable)	ADDRESS (Business Address A	Acceptable)
BUSINESS ACTIVITY, IF AN	Y, OF SOURCE	BUSINESS ACTIVITY, IF ANY,	OF SOURCE
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)
/\$		\$	
/\$		\$	
/\$		\$	

# SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements

- Mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. Per Government Code Section 89506, these payments may not be subject to the gift limit. However, they may result in a disqualifying conflict of interest.
- For gifts of travel, provide the travel destination.

► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S):// AMT: \$	DATE(S):/
► MUST CHECK ONE: ☐ Gift -or- ☐ Income	► MUST CHECK ONE: ☐ Gift -or- ☐ Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
► If Gift, Provide Travel Destination	► If Gift, Provide Travel Destination
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S):/	DATE(S)://
► MUST CHECK ONE: ☐ Gift -or- ☐ Income	► MUST CHECK ONE: ☐ Gift -or- ☐ Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
► If Gift, Provide Travel Destination	► If Gift, Provide Travel Destination
Comments:	