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

Revised July 2019

Complete and return to	this original Application to th		
Application for Appointment to:	Board 1		1 Alternate
(Please circle one)	Board 2		2 Alternate 3 Alternate
	Board 3	-	
Enter your name, mailing address and daytim vailable for public review, you may list your ddress or other personal contact information	business/office address, telephon	es provided. Because enumber and e-mail a	this form is a document address in lieu of your home
Do you authorize release of your private	e/personal information?	yes no	Ň
lame: JEFFREY MOR	RIS Home Add		
city: <u>SRN FRANCISCO</u>) State:	Zip co	de: <u>94/83</u>
Business Address: <u>SAME</u>	City:	State:	11. 4
Home Phone:/R/	Work Phone: _ <u>\$115_606</u>	9500 Fax#:	11/4
Pager #: _ <i>////</i> }	E-Mail Address		
Are you a United States citizen, or a resi	ident alien who is eligible for a	nd has applied for ci	tizenship? 💢 Yes 🗌 No
Have you ever been convicted of a felon be a felony? Yes No (If yes, please attach a statemer	nt describing the offense(s) for	which you have bee	
the date of the conviction(s), an			
Pursuant to Ordinance No. 393-98 the A person shall not be eligible for			neele board unless he or
she has a minimum of five years' profess accountant or public accountant; (2) lice nationally recognized professional organ Appraiser or by the State Board of Equa- application form. This requirement does same seats.	ssional experience in this state ensed real estate broker; (3) att nization, or property appraiser of alization. Documentation of qua- s not apply to incumbent board	as one of the following orney; or (4) properticed by either the alifying experience realifying experience real	ng: (1) certified public y appraiser accredited by a e Office of Real Estate nust be submitted with this
Please state your qualifications: AAB	BZ MEMBEQ LOD NSED RALESTATE (TOJJ ME BRIZA (RE)	MBER APPHISALINS PRED
Please state your business and/or profes	SSIONAL EXPERIENCE:	antisony s	PACES 10CT
Occupation: <u>/NVESTOR</u>	Education	n:_ <i>STRWFOR/</i>) BA 1967
Divic Activities: MARINA COM . AC	SSDC: S.F. 200 WG-10	alsociety	-OCYMPIC CLUB
Ethnicity (optional): <u>Wおバモ</u>	Sex (optional)	: ⊠M □ F	tain)
Other Personal Information (optional)			
Would you be able to attend Day Meetin How many days a week would you be a		Evening meetin How many eveni	-
Have you attended an Assessment Appe	eals Board meeting? X Yes		
Appearance before the RULES	COMMITTEE is a requireme	ent before any appo	ointment oan be made.
Date: 9-1-2022	Note: Your application will be re Applicant's Signature:	etained for one year	
		1/1//	
For Office Use Only: Appointed to Boa	ard #· Seat #:	Ter	m Expires:

JJM ASSOCIATES

September 1, 2022 Rules Committee of the Board of Supervisors C/O Assessment Appeals Board Administrator City Hall, Room 263 San Francisco CA 94102

Attention: Supervisors Peskin, Mandelman, Chan

RE: Reappointment to the Assessment Appeals Board

Dear Supervisors

I have served on Board 1 of the Assessment Appeals Board since September 6, 2007. I seek your reappointment recommendation for a new three year term to the full Board of Supervisors. I am well qualified to continue in this position for the following reasons.

- I have read, assimilated and follow all relevant guidelines and laws from the State Board of Equalization, Revenue and Taxation Code Sections and Assessment Appeals Manual.
- Applied my over 35 years of institutional investment real estate management experience to determine equitable valuation for assessment purposes.
- Worked very professionally in a Board 1 leadership role with the AAB Administrator Alistair Gibson and his staff, Board City Attorneys, Assessor's office, and commercial property owners and their legal and appraisal representatives.
- Have the support of Administrator Gibson and fellow Board 1 members to be reappointed.
- Have more than the requisite qualifications to serve, as outlined on the attached Application and Resume, including: licensed real estate broker, member of the Appraisal Institute (MAI) and the above mentioned 35 years of sophisticated investment real estate advisory, valuation, financing and acquisition experience.

Therefore, I would very much appreciate your support in my reappointment to Board 1 of the Assessment Appeals Board. I will be present and available for any questions at your upcoming meeting of the Rules Committee. Thank you for your consideration.

Sincerely yours,

Jenneyy. Morris

cc: Supervisor Catherine Stefani

Resume of Jeffrey J. Morris

Qualifications

California State Real Estate Broker License (No. 00397435) [retired]

Member Appraisal Institute [MAI] (No.149594) [retired]

Professional Experience: 35 year career in national investment real estate advisory, portfolioproperty management, transaction, financing and valuation

Business/Professional Experience

March, 2007--

JJM Associates, San Francisco

Independent real estate consulting and investment

1981-Feb. 2007

BlackRock Realty, San Francisco (and predecessor firms)

Director-Portfolio Manager of Apartment Value Funds: over \$900 million in U.S. apartment investments.

1991-1999 Managing Director, Metric Property Management:

\$2.5 billion national portfolio of multi family, office,

industrial and retail properties.

1981-1990 Vice President/Senior Vice President of Portfolio

Management.

1971-1980

Coldwell Banker Management Corporation, San Francisco

Vice President, Appraisal- Consultation Service

Education

BA Political Science Stanford University, 1967

Civic-Charitable Activities:

2007—

Member, Assessment Appeals Board, City and County of

San Francisco [three year term]

1989-2001

Board of Directors, Golden Gate Park Stables, Inc.

[Concession with the San Francisco City Recreation and Park

Department]

Current Marina Community Association Board Member; San Francisco Zoological Society; California Academy of Sciences; American Conservatory Theatre (ACT); Olympic Club Foundation

J.JMAssociates@sbcglobal.net



STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A Public Document

Date Initial Filing Received
Filing Official Use Only

E-Filed 03/22/2022 11:23:25

Filing ID: 202936106

Please type or print in ink.	202930100
NAME OF FILER (LAST)	(FIRST) (MIDDLE)
Morris, Jeffrey	
1. Office, Agency, or Court	
Agency Name (Do not use acronyms)	
City and County of San Francisco	×
Division, Board, Department, District, if applicable	Your Position
Assessment Appeals Board	Member
► If filing for multiple positions, list below or on an attachment. (Do not to	use acronyms)
Agency:	Position:
2. Jurisdiction of Office (Check at least one box)	Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
☐ State	☐ (Statewide Jurisdiction)
Multi-County	X County of San Francisco
City of	Other
3. Type of Statement (Check at least one box)	
X Annual: The period covered is January 1, 2021 through	Leaving Office: Date Left/
December 31, 2021.	(Check one circle)
The period covered is, through	 The period covered is January 1, 2021 through the date of leaving office.
December 31, 2021.	○ The period covered is/, through the date
Assuming Office: Date assumed	of leaving office.
Candidate: Date of Election and office sought,	if different than Part 1:
4. Schedule Summary (must complete) ▶ Total numbe	er of pages including this cover page: $\frac{8}{100}$
Schedules attached	
X 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	STATE ZIP CODE
MAILING ADDRESS STREET CITY (Business or Agency Address Recommended - Public Document)	
Sa	n Francisco CA 94123
DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS
()	in this statement and to the heat of my knowledge the information contained
herein and in any attached schedules is true and complete. I acknowle	
I certify under penalty of perjury under the laws of the State of Ca	lifornia that the foregoing is true and correct.
Data Stand 03/22/2022	SignatureJeffrey Morris
Date Signed	(File the originally signed paper statement with your filing official.)

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
Morris, Jeffrey

NAME OF BUSINESS ENTITY		► NAME OF BUSINESS ENTITY
Costco Corp.		BlackRock Inc.
GENERAL DESCRIPTION OF THIS BI	JSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Retail		Financial
FAIR MARKET VALUE		FAIR MARKET VALUE
	10,001 - \$100,000	\$2,000 - \$10,000 X \$10,001 - \$100,000
	ver \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT		NATURE OF INVESTMENT X Stock Other
X Stock Other	(Describe)	(Describe)
Partnership O Income Received o	of \$0 - \$499 of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
, , 21	<u>/·21</u>	
ACQUIRED DISPOS	ED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY		► NAME OF BUSINESS ENTITY
Home Depot Inc.		Oracle Inc.
GENERAL DESCRIPTION OF THIS B	JSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Home Improvement		Tech
FAIR MARKET VALUE		FAIR MARKET VALUE
	10,001 - \$100,000	
	over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
		NATURE OF INVESTMENT
NATURE OF INVESTMENT X Stock Other		X Stock Other
Partnership O Income Received	(Describe) 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)	O lucome Received of \$200 of More (Kehnik of Schedule of
IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
, , 21	/ 21	<u></u>
ACQUIRED DISPO	-J	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY		► NAME OF BUSINESS ENTITY
Coach Inc.		McDonalds Inc.
GENERAL DESCRIPTION OF THIS B	USINESS	GENERAL DESCRIPTION OF THIS BUSINESS
retail		Food
FAIR MARKET VALUE		FAIR MARKET VALUE
	610,001 - \$100,000	X \$2,000 - \$10,000
\$100,001 - \$1,000,000 (C)	Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	1	NATURE OF INVESTMENT
X Stock Other		X Stock Other (Describe)
	(Describe)	Partnership O Income Received of \$0 - \$499
Partnership	of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C
		IF APPLICABLE, LIST DATE:
IF APPLICABLE, LIST DATE:	I I	
	, 21	/ /21 / /21
IF APPLICABLE, LIST DATE:	_/ 21 SED	ACQUIRED / / 21 DISPOSED

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
Morris, Jeffrey

NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
FedEx Corp.	Visa Inc.
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Delivery	Financial
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 X \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	X \$100,001 - \$1,000,000 ☐ Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other	X Stock
(Describe)	(Describe)
☐ Partnership ☐ Income Received of \$0 - \$499 ☐ Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
8 -4	/ /21 / /21
NAME OF BUSINESS ENTITY	▶ NAME OF BUSINESS ENTITY
	Chevron
Google Inc.	GENERAL DESCRIPTION OF THIS BUSINESS
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BOOMESS
Tech	Energy
FAIR MARKET VALUE	FAIR MARKET VALUE
32,000 - \$10,000 X \$10,001 - \$100,000	☐ \$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other	X Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
THE STATE OF THE S	IF APPLICABLE, LIST DATE:
IF APPLICABLE, LIST DATE:	22
<u> </u>	<u> </u>
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Proctor & Gamble	Dick's Sporting Goods Inc.
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Consumer Products	Retail
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 X \$10,001 - \$100,000	☐ \$2,000 - \$10,000 X \$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
X Stock Other	X Stock Other
(Describe)	(Describe) Partnership O Income Received of \$0 - \$499
Partnership O Income Received of \$0 - \$499 O 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

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
Morris, Jeffrey

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Walt Disney Co.	Intel Corp.
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Retail	Tech
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 X \$10,001 - \$100,000	X \$2,000 - \$10,000 S10,001 - \$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	X Stock Other
X Stock Other (Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
, , 21 , , 21	, , 21 , , 21
	ACQUIRED DISPOSED
	NAME OF BUSINESS ENTITY
► NAME OF BUSINESS ENTITY	
Pepsico	Visa Inc.
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Food	Financial
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 X \$10,001 - \$100,000	☐ \$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
X Stock Other (Describe)	X Stock Other (Describe)
Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership Oncome 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
AOQUINED	
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
EBay Inc.	T Rowe Price Group Inc.
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Tech/Retail	Financial
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \times \$10,000	\$2,000 - \$10,000 X \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other	X Stock Other (Describe)
(Describe) Partnership	Partnership O Income Received of \$0 - \$499
☐ Partnership ☐ Income Received of \$0 or More (Report on Schedule C)	Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
2424	, ,21 , ,21
J ZI JZI	ACQUIRED DISPOSED
ACQUIRED DISPOSED	II AOGUINES SIGNOCES

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 t	his original App	lication to the	Assess		
Application for Appointment to:		Board 1	or		Alternate
(Please circle one)		Board 2	or		Alternate
		Board 3	or		Alternate
Enter your name, mailing address and daytin available for public review, you may list your address or other personal contact informatior	business/office ad	per in the spaces dress, telephone	provided number	. Because this and e-mail addi	form is a document ress in lieu of your home
Do you authorize release of your private.	/personal inform	atio <u>n?</u>	yes [no ,	
Name: Kvistine Nelson Let					
		State:		Zip code:	<u> </u>
Business Address:		City: 5 6		State:	Zip Code:
	Work Phone:			Fax #:	
Pager #:					
				-li-d for altima	nobin2 Voc U N
Are you a United States citizen, or a resi					
Have you ever been convicted of a felon	y in this state, or	convicted of a	ny offen:	se which, if co	mmitted in this state, w
be a felony? Yes No (If yes, please attach a statemer	at describing the	offense(s) for y	vhich vo	ı have been o	convicted.
the date of the conviction(s), an	nd the court(s) the	at convicted yo	u.)	a navo boon v	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Pursuant to Ordinance No. 393-98 the					
A person shall not be eligible for					als board unless he or
she has a minimum of five years' profes	cional evnerienc	e in this state a	s one of	the following:	(1) certified public
accountant or public accountant; (2) lice	nsed real estate	broker: (3) atto	rnev: or	(4) property a	ppraiser accredited by
nationally recognized professional organ	nization, or prope	erty appraiser o	ertified b	v either the O	ffice of Real Estate
Appraiser or by the State Board of Faua	lization. Docum	entation of qua	lifying ex	perience mus	st de submitted with this
application form. This requirement does	not apply to inc	umbent board i	nembers	nominated for	or appointment to their
P. 1	Gchile 6	La Avaise	K	en/ 45h	le Asont
Please state your qualifications: Real	Valle 1	11041700		41 07/2	719000
Please state your business and/or profes	asianal ayparian	on Rial	4.5 hr	k	
Please state your business and/or profe	ssional expendin	ce		N 1000	
Occupation: Real Estate		_ Education	BA	UCL	
3 W V	1 Boards	5			
		Sex (optional):	П м	ЖF	
Ethnicity (optional):		Sex (optional).	IVI		
Other Personal Information (optional)	161	n- m			
Would you be able to attend Day Meetin	ngs? Yes	□ No		ing meetings	
How many days a week would you be a	vailable for hear				s a week?/
Have you attended an Assessment App	eals Board meet	ing? Yes			
Appearance before the RULES	S COMMITTEE is lote: Your applic	s a requireme	nt before	any appoin	tment can be made.
The state of the s		_	/	7/1	11,
Date: 8/29/2022	Applicant's Sig	gnature:		, we	
			T	~~~~~	
For Office Use Only: Appointed to Boa	rd #·	Seat #:	O	Term	Expires:
FOR OTICE USE UNIV. ADDULINED ID DUA	ια π				

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A Public Document

Date Initial Filing Received
Filing Official Use Only

E-Filed 03/29/2022 13:19:48

Filing ID: 203150129

Please type or print in ink.	203150129
NAME OF FILER (LAST)	(FIRST) (MIDDLE)
Nelson, Kristine	
1. Office, Agency, or Court	
Agency Name (Do not use acronyms)	
City and County of San Francisco	
Division, Board, Department, District, if applicable	Your Position
Assessment Appeals Board	Member
▶ If filing for multiple positions, list below or on an attachment. (D	Do not use acronyms)
Agency:	Postuori.
2. Jurisdiction of Office (Check at least one box)	Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
☐ State	
X Multi-County California	X County of San Francisco
X City ofSan Francisco	Other
E. Oity of	
3. Type of Statement (Check at least one box)	
X Annual: The period covered is January 1, 2021 through	Leaving Office: Date Left
December 31, 2021.	(Check one circle)
The period covered is, through	The period covered is January 1, 2021 through the date of leaving office.
December 31, 2021.	-
Assuming Office: Date assumed	The period covered is/, through the date of leaving office.
	-
Candidate: Date of Election and office so	sought, if different than Part 1:
4. Schedule Summary (must complete) ► Total nu	umber of pages including this cover page:8
Schedules attached	
	X 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-	3
□ None - No reportable interests on any schedule	
5. Verification	
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	CITY STATE ZIP CODE
(dusiness of Agency Address Recommended - Fabric Sociation)	San Francisco CA 94117
DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS
()	
I have used all reasonable diligence in preparing this statement. I herein and in any attached schedules is true and complete. I ack	have reviewed this statement and to the best of my knowledge the information contained knowledge this is a public document.
I certify under penalty of perjury under the laws of the State	
Bata Signad 03/29/2022	Signature Kristine Nelson
Date Signed 03/29/2022 (month, day, year)	(File the originally signed paper statement with your filing official.)

SCHEDULE B Interests in Real Property (Including Rental Income)

	RNIA FORM	
Name		
Nelson,	Kristine	

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
287 Sanchez	565-567 Natoma
CITY	CITY
San Francisco	San Francisco
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$100,000 \$100,001 - \$1,000,000 X100,001 - \$1,000,000 X100,001 - \$1,000,000 X100,000 X10	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 X Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
∑ Ownership/Deed of Trust	X Ownership/Deed of Trust
Leasehold Other	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000	\$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. None	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
business on terms available to members of the public	without regard to your official status. Personal loans and
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 busing NAME OF LENDER*	al lending institution made in the lender's regular course of without regard to your official status. Personal loans and ness must be disclosed as follows:
business on terms available to members of the public loans received not in a lender's regular course of busin	without regard to your official status. Personal loans and ness must be disclosed as follows:
business on terms available to members of the public loans received not in a lender's regular course of busin	without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER*
business on terms available to members of the public loans received not in a lender's regular course of busin NAME OF LENDER* ADDRESS (Business Address Acceptable)	ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)
business on terms available to members of the public loans received not in a lender's regular course of busin NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER	NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER
business on terms available to members of the public loans received not in a lender's regular course of busin NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE Mone None	without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)
business on terms available to members of the public loans received not in a lender's regular course of busin NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)	without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)
business on terms available to members of the public loans received not in a lender's regular course of busin NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)	without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE Whone HIGHEST BALANCE DURING REPORTING PERIOD
business on terms available to members of the public loans received not in a lender's regular course of busin NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000	without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)

Comments:

SCHEDULE B Interests in Real Property (Including Rental Income)

	RNIA FORM	
Name		
Nelson,	Kristine	

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
23-25 Moss Street	63 Moss Street
CITY	CITY
g Puraning	San Francisco
San Franciso FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 ACQUIRED SIDEROSED	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /21 / /
X Over \$1,000,000	X Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
X Ownership/Deed of Trust Easement	∑ Ownership/Deed of Trust
Leasehold Other	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	□ \$0 - \$499 □ \$500 - \$1,000 □ \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	\$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.	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.
	II INone
None	
□ None	
Vou are not required to report loans from a commer	cial lending institution made in the lender's regular course of ic without regard to your official status. Personal loans and siness must be disclosed as follows:
You are not required to report loans from a commer business on terms available to members of the publicans received not in a lender's regular course of business.	siness must be disclosed as follows:
You are not required to report loans from a commer business on terms available to members of the publ loans received not in a lender's regular course of bunder of LENDER*	siness must be disclosed as follows: NAME OF LENDER*
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SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FOF	
Name	.1
Nelson, Kristine	

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
850 Capp Street	1466-1468 Waller Street
CITY	CITY
	San Francisco
San Francisco 94117 FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000 03/ 06/22/_21
\$10,001 - \$100,000	\$10,001 - \$100,000
X \$100,001 - \$1,000,000	\$100,001 - \$1,000,000 ACQUIRED DISPOSED X Over \$1,000,000
Over \$1,000,000	[A] OVER \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
X Ownership/Deed of Trust	X Ownership/Deed of Trust Easement
Leasehold Other	Leasehold U Other
	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	
\$0 - \$499	\$10,001 - \$100,000 OVER \$100,000
X \$10,001 - \$100,000 ☐ OVER \$100,000	
SOURCES OF RENTAL INCOME: If you own a 10% or greater	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of
interest, list the name of each tenant that is a single source of	income of \$10,000 or more.
income of \$10,000 or more.	X None
	None
income of \$10,000 or more.	X None
income of \$10,000 or more.	X None
income of \$10,000 or more. X None	
X None X None You are not required to report loans from a commerce	cial lending institution made in the lender's regular course of
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income of \$10,000 or more. X None	cial lending institution made in the lender's regular course of c without regard to your official status. Personal loans and siness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)
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income of \$10,000 or more. X None	cial lending institution made in the lender's regular course of c without regard to your official status. Personal loans and siness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)

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



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

Complete and retu	m this original 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
	lytime telephone number in the spaces provided. Because this form is a document our business/office address, telephone number and c-mail address in lieu of your home atlon.
	ate/personal information? yes no
Name: ADENA GILBER	Home Address:
Business Address: 1966 TICE VAI	State: Zip code:
Home Phone:	Work Phone: 510.240,4260 Fax#
Pager #:	Work Phone: 510.240,4260 Fax#: E-Mail Address: adena. gilbert 2 56cg/osal. net
	esident alien who is eligible for and has applied for citizenship? 🗵 Yes 🗌 No
be a felony? Yes No (if yes, please attach a stalen	iony in this state, or convicted of any offense which, if committed in this state, would nont describing the offense(s) for which you have been convicted, and the court(s) that convicted you.)
Pursuant to Ordinance No. 393-98 t	the following qualifications are required:
Appraiser or by the State Board of Equ	parization, or property appraiser certified by either the Office of Real Estate undication. Documentation of qualifying experience must be submitted with this less not apply to incumbent board members nominated for appointment to their
Please state your business and/or pro	lessional experience: RETIRED ADMINISTRATIVE LAW
	e above Education: J.D.
Onle Acthetian HOA ROVERNIL	downats connitee, country animal shelter volvete
	Sex (optional): M K F
Other Personal Information (optional)	
Yould you be able to attend Day Meel low many days a wook would you be	available for hearings?/ How many evenings a week?/
lave you attended an Assessment Appearance before the RULL	ES COMMITTEE is a requirement before any appointment can be made.
Date: 6/20/22	Note: Your application will be relatined for one year. Applicant's Signature: Adena Tiber T
For Office Use Only: Appointed to Bo	

CALIFORNIA FORM 700

STATEMENT OF ECONOMIC INTERESTS COVER PAGE A PUBLIC DOCUMENT

Date Initial Filing Received

Please type or print in Int.

ME OF FILER (LAST) (FIRST)	MOOLE
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Office, Agency, or Court	
Agency Name (Do not use acronyms)	0 1-1
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Division, Board, Department, Disfrict, if applicable	TOUT POURIOR
	HAD COMMISSIONER-BOARD2
➤ if filing for multiple positions, list below or on an attachment, (Do	not use ecronyme)
Agency:	Position:
Jurisdiction of Office (Check at least one box)	
State	Judge, Retired Judge, Pro Tern Judge, or Court Commissioner (Statewide Jurisdiction)
Multi-County	Acounty of S.F.
City of 5.F.	Other
Type of Statement (Check at least one box)	
December 31, 2021 .	(Chack one circle.)
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Qualifications

As an Administrative Law Judge for the San Francisco Rent Stabilization and Arbitration Board, my duties included evaluating capital improvement projects, many involving multi-million dollar costs, that increased property values; evaluating building operating and maintenance expenses including for properties where expenses exceeded building income thereby affecting the market value of the property; and evaluating special circumstance requests for increased residential rents based on rents in comparable buildings. These comparable rent requests included surveys of various buildings in San Francisco, often performed by real estate agents or appraisers, that showed property values based on rental income.

I have purchased and sold numerous properties, and have been both a tenant and a landlord.

Additionally, on several occasions I petitioned for a reduced assessed value on my personal home at the time (for property not located in San Francisco). That experience illuminated the process a property owner utilizes in filing such a petition including identifying comparable properties, explaining the loss of value, and summarizing why a reduced value would be justified.