File No.	120732
----------	--------

Committee	Item No.	2	
<b>Board Item</b>	No.	•	

### **COMMITTEE/BOARD OF SUPERVISORS**

AGENDA PACKET CONTENTS LIST

Committee:	Rules	Date	7/11/12
Board of Su	pervisors Meeting	Date	
Cmte Boa	rd		
	Motion Resolution Ordinance Legislative Digest Budget Analyst Report Legislative Analyst Report Youth Commission Report Introduction Form (for hearing Department/Agency Cover Let MOU Grant Information Form Grant Budget Subcontract Budget Contract/Agreement Award Letter Application Public Correspondence		
OTHER  OTHER	(Use back side if additional sp		
	oy: Linda Wong	Date <u>7/6/12</u>	

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

### MOTION NO.

1	[Reappointment, Planning Commission – Michael Antonini]
2	
3	Motion approving/rejecting the Mayor's nomination of Michael Antonini to the Planning
4	Commission term ending July 1, 2016.
5 .	
6	WHEREAS, Pursuant to Charter Section 4.105, the Mayor has submitted a
7	communication notifying the Board of Supervisors of the nomination of Michael Antonini to the
8	Planning Commission, received by the Clerk of the Board on July 2, 2012; and
9	WHEREAS, The Board of Supervisors, by Motion 02-80 established a process to
10	review the Mayor's nomination to the Planning Commission; now, therefore, be it
11	MOVED, That the Board of Supervisors hereby approves/rejects the Mayor's
12	nomination of Michael Antonini to the Planning Commission term ending July 1, 2016.
13	
14	
15	
16	
17	
18	
19	
20	
21	
22	
23	
24	
25	

# Office of the Mayor San Francisco



Originally

Bos-11

Originally

Efile, cpage, also

EDWIN M. LEE altry

MAYOR

Notice of Appointment

July 2, 2012

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

Honorable Board of Supervisors:

Pursuant to Chart Section 4.105, I hereby make the following nominations to the San Francisco Planning Commission:

Michael Antonini, for a term ending June 30, 2016,

Richard Hillis, assuming the seat held by Ron Miguel, for a term ending June 30, 2016.

I am confident that Mr. Antonini and Mr. Hillis, both CCSF electors, will serve our community well. Attached are their qualifications to serve, which will demonstrate how these 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 these appointments.

Sincerely.

Edwin M. Lee

Mayor

# OFFICE OF THE MAYOR SAN FRANCISCO



EDWIN M. LEE Mayor

July 2, 2012

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

Dear Ms. Calvillo,

Pursuant to Chart Section 4.105, I hereby make the following nominations to the San Francisco Planning Commission:

Michael Antonini, for a term ending June 30, 2016,

Richard Hillis, assuming the seat held by Ron Miguel, for a term ending June 30, 2016.

I am confident that Mr. Antonini and Mr. Hillis, both CCSF electors, will serve our community well. Attached are their qualifications to serve, which will demonstrate how these 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 these appointments.

Sincerely

Edwin M. Lee

Mayor

### Michael J. Antonini, D.D.S.

#### Personal

- · Born Livermore, California, 1946
- Married Linda Madigan 1973
- Children John, 1978; Peter. 1981-2002; Gina, 1984
- Residence 110 Broadmoor Drive, San Francisco, CA 94132

#### Education

- University of Santa Clara, Santa Clara, 1968 B.A., Major: History Minor: Biology
- University of the Pacific School of Dentistry, San Francisco, CA 1972, D.D.S.

#### Memberships

- American Dental Association 1972 present
- California Dental Association 1972 present
- San Francisco Dental Society, President 1986-87, Editor 1982-84, Trustee Finance Committee 2000 present
- California State Board of Dental Examiners, Examining Committee 1982-96
- St. Brendan Men's Club, President 1992-93
- St. Brendan Parish Advisory Board, President 1997-98
- St. Ignatius College Preparatory, Fathers Club
- Olympic Club
- Lakeside Property Owners Association
- San Francisco Italian Athletic Club
- San Francisco History Association
- DSE Running Club
- Mechanics Institute
- American Institute of Architects (A.I.A.)

### Positions - Elected or Appointed

- San Francisco Dental Political Action Committee, President 2001 present
- San Francisco City and County Planning Commission, Member 2002 present, Vice-President 2002-04
- San Francisco Republican County Central Committee, Member, 12th Assembly District 2003 present

#### Awards

- Certificate of Merit City and County of San Francisco 1994
- Best Editorial Newsletter California Dental Association 1983, 1984
- Tau Kappa Omega Dental Honor Society, 1972
- Annual Honoree Coalition of San Francisco Neighbors, 2004

#### Hobbies

Running, creative writing, gardening

#### Community Service

- San Francisco District 7 Advisory Council, Vice-President 2001-present
- West of Twin Peaks, Neighborhood leader graffiti removal
- Sisters of The Missionaries of Charity probono dentistry

# CALIFORNIA FORM 700 PAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

# STATEMENT OF ECONOMIC INTERESTS

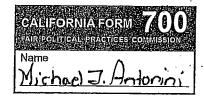
Date Receive Official Use Only

COVER PAGE FILED

. MAR 2 6 2012

12 MAR 28 Please type or print in ink. ITY & COUNTY DE CE NAME OF FILER 1140 1. Office, Agency, or Court Agency Name ANNING COMMISSION Division, Board, Department, District, if applicable ▶ If filing for multiple positions, list below or on an attachment. Position: . 2. Jurisdiction of Office (Check at least one box) Judge or Court Commissioner (Statewide Jurisdiction) State SCOUNTY OF SAN FRANCISCO ☐ Multi-County SAN FRANCISCO 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2011, through Leaving Office: Date Left . (Check one) December 31, 2011. The period covered is January 1, 2011, through the date of The period covered is \_\_ leaving office. December 31, 2011. O The period covered is \_ the date of leaving office. Office sought, if different than Part 1: Candidate: Election Year 4. Schedule Summary ▶ Total number of pages including this cover page: Check applicable schedules or "None." Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-1 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule A-2 - Investments - schedule attached Schedule B - Real Property - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached None - No reportable interests on any schedule 5. Verification STATE ZIP CODE MAILING ADDRESS CITY STREET DAYTIME TELEPHONE NUMBER 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. 1ARCH 25, 2012 Signature

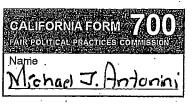
Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%) Do not attach brokerage or financial statements.



► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Antonini Family 1997 Trust  GENERAL DESCRIPTION OF BUSINESS ACTIVITY  Michael 7. Antonini Subtrust	Antonini Family 1997 Trust GENERAL DESCRIPTION OF BUSINESS ACTIVITY Michael J. Anterial Subtrust
as sexurate property	as separate property
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$10,001 - \$10,000 \$10,000 Over \$1,000,000
NATURE OF INVESTMENT Kraft Fueds	NATURE OF INVESTMENT Stock Other Wal Mart
(Describe)	(Describe)
Partnership O income Received of \$0 - \$499 O 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:
NAME OF BUSINESS ENTITY Profit sharing don	NAME OF BUSINESS ENTITY Profit sharing plan
Michael J. Antonini pos. Inc GENERAL DESCRIPTION OF BUSINESS ACTIVITY	Michael J. Antonini, Dos, Jac GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Refirement Plan	Retirement Plan
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000 \$100,000 Over \$1,000,000	□ \$100,001 - \$1,000,000 □ Over \$1,000,000
second deed of truit	Second dood of trust
NATURE OF INVESTMENT 3225-3227 20th Street	NATURE OF INVESTMENT 400-410 Cdc st 5.t.
Partnership O Income Received of \$0 - \$499	Slock Other Coscribe) Was Price    Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O income Received of \$500 or More (Report on Schedule C)
IT ADDITION TO LINE TO THE	tinal nagment
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE of fully a mortized a mortized deed
ACQUIRED DISPOSED	ACQUIRED DISPOSED CF trust
NAME OF BUSINESS ENTITY Profit shoring (land)  Nichael J. Antonini DDS, Inc  GENERAL DESCRIPTION OF BUSINESS ACTIVITY	► NAME OF BUSINESS ENTITY
Michael J. Hintonini, DDS, Inc. GENERAL DESCRIPTION OF BUSINESS ACTIVITY	
	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Metirement Plan	
FAIR MARKET VALUE 7 at 1 29 17 17 1	FAIR MARKET VALUE
\$2,000 - \$10,000 \$\times \$10,001 - \$100,000 \$\times \$1,000,000 \$\times \$\times \$1,000,000	☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000 ☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000
second deed of trust	☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000
NATURE OF INVESTMENT 2604-2608 Third Sts.	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
Partnership O income Received of \$0 - \$499 O income Received of \$500 or More (Report on Schedule C)	Pertnership 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:
111 730, 11 of felly	
ACQUIRED DISPOSED amon 1764	ACQUIRED DISPOSED
Comments	

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

Do not attach brokerage or financial statements.



NAME OF BUSINESS ENTITY Profit shoring	NAME OF BUSINESS ENTITY Profit shoring place
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	Michael J. Hotowini ass, Inc
Reticement Plan  FAIR MARKET VALUE	FAIR MARKET VALUE
NATURE OF INVESTMENT  Stock Other  (Describe)  Partnership O Income Received of \$0 - \$499  O Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT   Croseft Corporation
IF APPLICABLE, LIST DATE:/	IF APPLICABLE, LIST DATE:
NAME OF BUSINESS ENTITY PROFIT Sharing plan  Michael J. Antunini Dry, Jac  GENERAL DESCRIPTION OF BUSINESS ACTIVITY	Make of Business Entity profit sharing plan Michael J. Andunini, 1995, Inc General description of Business activity
FAIR MARKET VALUE  \$2,000 - \$10,000  \$100,001 - \$1,000,000  Over \$1,000,000	Ketinement Plan   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 Open (Describe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT  Stock Other (Describe)  Partnership O Income Received of \$0 - \$499  O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:  5 / 31 / 11 / 11  ACQUIRED DISPOSED	IF APPLICABLE, LIST DATE:  5 /25/11 / 11  ACQUIRED DISPOSED
FAIR MARKET VALUE  \$2,000 - \$10,000	ANTONINI FAMILY 1997 Trust GENERAL DESCRIPTION OF BUSINESS ACTIVITY MICHAEL J. Antonin. Subtruct  Q3 Sexcrate Proyecty  FAIR MARKET VALUE  \$10,001 - \$10,000
NATURE OF INVESTMENT  Stock Other MOODECT TWC  (Describe)  Partnership O Income Received of \$0 - \$499  O Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT  Stock Other  (Describe)  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:

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	_
Ī	Michael J. Antonini	_

► NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GING Marie M. Anterior Trust	Gina Marie M. Antenini Trust
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Trust- Grang Pezzela trustees	Trust - Mary Pezzola-trustees
	FAIR MARKET VALUE
FAIR MARKET VALUE	\$2,000 - \$10,000 \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000
NATURE OF INVESTMENT Slock Other Cpescibe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT  Stock Other Johnson and Johnson (Describe)  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:
/ / 11 / / 11	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
FAIR MARKET VALUE  \$2,000 - \$10,000	NAME OF BUSINESS ENTITY  GREAT DESCRIPTION OF BUSINESS ACTIVITY  Trust - Mar - Pezzolo - trustees  FAIR MARKET VALUE  \$2,000 - \$10,000
NATURE OF INVESTMENT   I a ns Suno ra , 7 c	NATURE OF INVESTMENT VCA phone Group PLC  Stock Other VCA phone Group PLC  (Describe)  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:
	/
Since Andrew Marie M. Andrial Trust GENERAL DESCRIPTION OF BUSINESS ACTIVITY	Name of Business Entity orufit shering Michael J. Anteninions, 7~c plangement description of Business activity
FAIR MARKET VALUE	Retirement Plan
<u>,</u> ⊠'\$2,000 - \$10,000	☐ \$2,000 - \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT HEWICH PACK and Co.  (Describe)	NATURE OF INVESTMENT US GOVERNOUS (Describe)
Partnership O income Received of \$0 - \$499 O 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:
	//_11//11
Comments:	

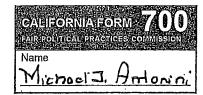
Stocks, Bonds, and Other Interests
(Ownership Interest is Less Than 10%)
Do not attach brokerage or financial statements.

A A A A A A	
BULL BUILDING BUILDING BUILDING	ľ
FAIR POLITICAL PRACTICES COMMISSION	
Name	
Michael J. Antonin	<u>,</u>

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
JOHN M. ANTONINI Trust	JOHN M. ANCONINI 1005+
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
TRUST-Linda antonini, Land	Trust. Linco Antonini trustees
	Trust. Maca Person trustees
Mid > FC FF (2	111017 1233017
FAIR MARKET VALUE	FAIR MARKET VALUE
<b>★</b> \$2,000 - \$10,000	\$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	
T 2 100,001 - \$1,000,000 T Over \$1,000,000	\$100,001 - \$1,000,000
NATURE OF INVESTMENT ME Kesson Corp	NATURE OF INVESTMENT Chevron Corp
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499	Partnership O 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;
. / /11 / /11	/ / 11 / / 11
ACQUIRED DISPOSED	ACQUIRED DISPOSED
	AOGOINED DIDFOGED
► NAME OF BUSINESS ENTITY .	► NAME OF BUSINESS ENTITY
John M. Antonini Trust	
	John M Antonini loust
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
	Linda Antonini
Trust - Mary Pezzula - trustees	Thurst Tollet cell
1 1 W 7 1/C 3 7010	Mary Vezzela
FAIR MARKET VALUE	FAIR MARKET VALUE
☐ \$2,000 - \$10,000 🔀 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
MATURE OF BUILDING	
NATURE OF INVESTMENT Oracle Corporation	NATURE OF INVESTMENT Charles & huch Cor
Stock Other Oracle Corporation	
Destroyable O leave Dessived of BO \$400	(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)	O Income Received of \$500 or More (Report on Schedule C)
	· ·
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
" AT LIGHTLE, GOT BATE.	IF AFFEIGABLE, EIGT DATE.
ACQUIRED DISPOSED	ACQUIRED DISPOSED
VCGOIVED DIOLOSED	ACQUIRED DISPOSED
L MALE OF PURILED PUREL	
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
John MANTENINI Irust	John M. Andenini Trust
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
1 · · · · · · · · · · · · · · · · · · ·	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
rust - Mac- Pezzela -+ rustecy	- Linda Amtonini
Marz (Jezocia - Trus 1 Co	Trust-Marz Pezzola - trustecs
FAIR MARKET VALUE 75	FAIR MARKET VALUE
	I
<b>5</b> \$2,000 - \$10,000	\$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
Stock Other Wells Fargo & Co.	NATURE OF INVESTMENT United Parcel Service
(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)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
, , , , , , , , , , , , , , , , , , , ,	TO THE MENT OF THE PARTY OF THE
/ / 11 / / 11	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
· 11	Vestalista Noi-OgEn
Comments	

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

Do not attach brokerage or financial statements.



	the state of the s
NAME OF BUSINESS ENTITY Profit Sharing	NAME OF BUSINESS ENTITY PORT STATING
Michael J. Antonini, DPS, Irc. Plan GENERAL DESCRIPTION OF BUSINESS ACTIVITY	Michael J. Antonia DP3, Inc plan GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Retirement Plan	Retirement Plan
FAIR MARKET VALUE	FAIR MARKET VALUE
☐ \$2,000 - \$10,000 <b>&gt;</b> \$10,001 - \$100,000	☐ \$2,000 - \$10,000 <b>절</b> \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Bank of America	NATURE OF INVESTMENT Country und c asset
Stock Souther Mortage Securities	Stock Sother Ivans trust Dackey
(Describe)  Partnership O Income Received of \$0 - \$499	(Describe) Partnership O Income Received of \$0 - \$499
O Income Received 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:
<u>, , , 11                               </u>	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY Profit sharing plan	NAME OF BUSINESS ENTITY Profit sharing
Wichael J. Antonini, DIDS. Inc.	Michael J. Antonni, DIS, Inc plan
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
RETIREMENT Plan	RETIREMENT Plan
FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$\$\frac{1}{2}\$\$ \$10,001 - \$100,000
Electron and the con con	S100 001 - \$1 000 000
NATURE OF INVESTMENT California State  NATURE OF INVESTMENT + axable munichands  (Describe)	NATURE OF INVESTMENT GNMA GOV+ Sacked
NATURE OF INVESTMENT Lax a blc munichands	Stock Solher GMO Securities
<u></u>	(Describe)
☐ Partnership ○ 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)
O mostillo rissantos el teste al mare fristant an estillado	
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	,,-,-,-,-
NAME OF BUSINESS ENTITY Profit sharing plan	MAME OF BUSINESS ENTITY Prof. 1 5 haring plan
Michael J. Hotemail DDS The GENERAL DESCRIPTION OF BUSINESS ACTIVITY	Michael J. Antonini DOS INC GENERAL DESCRIPTION OF BUSINESS ACTIVITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
RETIREMENT Plan	RETIREMENT Plan
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$\$10,001 - \$100,000	€ \$10,000 × \$10,000 × \$10,000 × \$100,000
S100 001 - \$1 000 000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT GSR MTG SECURITED	NATURE OF INVESTMENT Class A US GOVT
NATURE OF INVESTMENT Mortgage backed	NATURE OF INVESTMENT  Stock Pother Lund Sccurtics
(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 O income Received of \$500 or More (Report on Schedule C)
,	
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	<u></u>
ACQUIRED DISPOSED	ACQUIRED DISPOSED
· · · · · · · · · · · · · · · · · · ·	
Comments:	

# SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)

CALIFORNIA FORM 70	
Name	
Machael J. Antoni	<u>n</u>

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY ORSTRUST
ANTENIN: Family Properties, LC	A-3, Inc. 9, Michael Antonini
Name	Name
Address (Dustanes Address Acceptable)	Address (Coulom Address Addres
Address (Business Address Acceptable) Check one	Address (Business Address Acceptable) Check one
☐ Trust, go to 2   ☐ Business Enlity, complete the box, then go to 2	☐ Trust, go to 2       Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY rental ownership, administration properties	general description of business activity ranchines force property rental
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$0 - \$1,999  \$2,000 - \$10,000  \$10,001 - \$100,000  \$100,001 - \$1,000,000  \$100,001 - \$4,000,000  \$100,001 - \$4,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE;  \$0 - \$1,999  \$2,000 - \$10,000  \$10,001 - \$100,000  ACQUIRED DISPOSED  \$100,001 - \$1,000,000
NATURE OF INVESTMENT Sole Proprietorship Partnership Company	NATURE OF INVESTMENT   Sole Proprietorship   Partnership   Corporation
YOUR BUSINESS POSITION member, administrater	YOUR BUSINESS POSITION President, shoreholder
Y2: DENTIFY:THE GROSS INCOME RECEIVED INCOMES YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY (TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PROTRATA: SHARE OF THE GROSS INCOME! TO THE ENTITY TRUST)
\$0 - \$499	\$0 - \$499   \$\st\\$\$10,001 - \$100,000 my ppo-reta   \$500 - \$1,000   OVER \$100,000 shore of   \$1,001 - \$10,000   9ru \$3,1 h come   Was 3,500
P. 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF ( INCOME OF \$10,000 OR MORE (Aliculia separate allectif recessary)	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF UNCOME OF SID 000 OR MORE (Altial a species because source);
see attached page	Mrand Mr. M. Ke M = Cofferty
	6531 Mines Rd
► 4: INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR/TRUST:	▶ 41 INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST.
Check one box:	Check one box:
Name of Business Entity, if investment, or タセピ いってい	Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property all properties held by this Chitity are butistide the boundaries of	Assessor's Parcel Number or Street Address of Real Property all properties holdby this entity are located outside the
Description of Business Activity or 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:   \$2,000 - \$10,000   \$10,001 - \$100,000   \( \frac{11}{2} \)   \( \f	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000
NATURE OF INTEREST  Property Ownership/Deed of Trust  Slock Partnership  Non-1 cd   12 bill	NATURE OF INTEREST Property Ownership/Deed of Trust Slock Partnership
Leasehold Yrs, remaining	Leasehold Yrs, remaining Other S' Cor Porution
Check box if additional schedules reporting investments or real property are attached my ownership in Antonial	B Check box if additional schedules reporting investments or real property are attached I own \Co Shores & Curpunt
Comments Frank Propertice is 50%	51 CCK 150 (764) FPPC Form 700 (2011/2012) Sch. A2)
The other 50% is owned by	FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov
my sister Cardyn Cardinelli	300 shores of A-3, INC stock exist

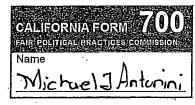
# FORM 700 - MICHAEL J.,

SCHEDULE A-2
INVESTMENT, INCOME ASSETS OF BUSINESS
ENTITIES/Trusts

-ANTONIN'S FAMILY PROPERTIES, LLC ITEM 3- names of teen reportable source of income of signed or more in 2011 to ANTONINI FAMILY PROPERTIES STATE FARM INSURANCE RON ANDRE-16,13400 LIVERMORE, CA 94550 STATE FARM INSURANCE \$16,16900 CATHY PASUT- GRAHAM -LIVERMORE, CA 94550 JOHNSON 1206AN \$ 13,200 cc PLEASANTON, CA FAMILY 94566 \$ 10,800°= SHERYL LOCKWOOD -PLEAS ANTON CA 94566 \$ 10,50000 CHRISTINE CARDULLO. PLEAS ANTON,CA 94566 \$ 16,800= CAMPIOTTI FAMILY -PLEA LANTON CA 94566 ROB PALASSOU -PLEASANTEN (A 94566 - 12,000 000) PLEAS-ANTEN CA 94566 - 12,000 STEVE WCLESKI Steve, Jeona Koppel -E 15,600 cc PLEASANTON, CA -014566 additional properties hold by Antonini Family Properties; LLC frem which Icss than \$10,000= from a single Fource was received in 2011

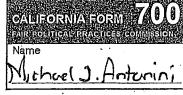
PLEASANTON, CA 94566

# **SCHEDULE A-2** Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)



► 1 BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
Michael J. Antonini, Drs. Inc	Antonini Family 1997 Trust
Name	Name
Address (Business Address Acceptable	Address (Business Address Acceptable)
Check one  Trust, go to 2  Business Entity, complete the box, then go to 2	Check one Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY  devotal practice	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$0 - \$1,999	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$0 - \$1,999
NATURE OF INVESTMENT Sole Proprietorship Partnership Acurpuration Other YOUR BUSINESS POSITION Chairman	NATURE OF INVESTMENT Sole Proprietorship Partnership Olher  YOUR BUSINESS POSITION
2. IDENTIFY: THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO 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 \$7 \$530 cc	□ \$0 - \$499 □ \$10,001 - \$100,000 □ receive
\$0 - \$499   \$10,001 - \$100,000   There of     \$500 - \$1,000   OVER \$100,000   U.a.   m/   \$1,001 - \$10,000   Stelent \$5,500	\$500 - \$1,000   OVER \$100,000   Mane of this income
And Donnelly, Des	TEXTALIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF A UNCOME OF \$10,000 OR MORE; British & Applied Shift (Indicately)
4: INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST Check one box:	A INVESTMENTS AND INTERESTS INCREAL PROPERTY HELD BY THE SECOND OF TRUSTS  Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	MINVESTMENT REAL PROPERTY
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, of Assessor's Parcel Number or Street Address of Real Property
Depotation of Duelogge Activity or	Description of Business Activity or
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	City or Other Precise Location of Real Property
FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000   / / 11 / / /11   / / 11   / / 11   / / 11   / / /11   / / / /	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000  \$10,001 - \$100,000  \$10,001 - \$1,000,000  ACQUIRED DISPOSED  Over \$1,000,000
NATURE OF INTEREST Stock Partnership	NATURE OF INTEREST  Property Ownership/Deed of Trust  Stock  Partnership
Leasehold Other	Leasehold Yrs, remaining Dither Cash
Check box if additional schedules reporting investments or real property are attached corporation is cured	図 Check box If additional schedules reporting investments or real property are attached アモアン・イェント カントロット カート
Linda, as port of the	FPPC Form 700 (2011/2012) Sch. A-2 FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

# **SCHEDULE A-2** Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)



▶ BUSINESS ENTITY OR TRUST	EUSINESS ENTITY OR TRUST
Anconini Family 1997 Trust	l.
Name	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one  23 Trust, go to 2	Check one
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$0 - \$1,999   \$2,000 - \$10,000   / / 11   / / 11     \$100,000   ACQUIRED   DISPOSED   \$100,001 - \$1,000,000   Over \$1,000,000   Over \$1,000,000   NATURE OF INVESTMENT   Sole Proprietorship   Partnership   Other	FAIR MARKET VALUE
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
SHARE OF THE GROSS INCOME RECEIVED (INCHEDE YOUR PROTATA)   SHARE OF THE GROSS INCOME TO THE ENTITY TRUST!   \$0 - \$499	DENTIFY: THE GROSS INCOME RECEIVED (INCLUDE YOUR PROPATA:   SHARE OF THE GROSS INCOME TO THE ENTITY IT UST)   \$0 - \$499
SALIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF A SALINGOME OF STOROGO OR MORE (Alianh a appropriational fracessary)	> 3: LIST: THE NAME OF EACH PREPORTABLE SINGLE SOURCE OF SINGOME OF \$10,000 OR MORE (Misch a superior share) (http://discress.org/).
ALINVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE COMES IN TH	SANVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OF TRUST A Check one box:    INVESTMENT   REAL PROPERTY
The state of the s	
Name of Business Entity, If Investment, or Assessor's Parcel Number or Street Address of Real Property  that term inched in 2004,  since trust heldings remain	Name of Business Entity, If Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000  \$1,001 - \$1,000,000  \$1,000,001 - \$1,000,000  Over \$1,000,000	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000
NATURE OF INTEREST ☐ Property Ownership/Deed of Trust	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached hudings reported  Comments:	Check box if additional schedules reporting investments or real property are attached
commenter 10 ocherly p 4-1	EDDO F 700 (2011 (2012) O-L A D

# **SCHEDULE A-2** Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)

CAL FAIR	JFORI	<b>VIA FO</b> L PRACTI	RM ces co	7/0	0
Nam		:\J.	Δ.4	d.05	

▶ 1 BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY/OR TRUST
ANTONINI Family 1997 Trust	Antonini Family 1997 Trust
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one Trust, go to 2 Business Entity, complete the box, then go to 2	Check one  Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED DISPOSED  \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Sole Proprietorship Partnership Clher	NATURE OF INVESTMENT Sole Proprietorship Partnership Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
SY DENTIFY: THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY IRUST)	>2. IDENTIFY THE GROSS INCOME: RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE IGROSS INCOME TO THE ENTITY TRUST)
□\$0-\$499 □\$10,001-\$100,000 + rust's provide □\$500-\$1,000 □ \$100,000 rent's about □\$1,001-\$10,000	\$500 - \$1,000 OVER \$100,000 France of Form
37 LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF UNCOME OF \$10,000 OR MORE (Altach a squarde sheet it necessary)	S LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF (NCOME OF \$10,000 OR MORE (Attacks a separate street to see \$3.00)
Michael J. Antenini, DRS, Irc.	SUMH KAPUK
Kevinc. Growney, Drs, Inc.	John Kristensen
A INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST	➤ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY, HELD BY THE 4.  BUSINESS ENTITY OR TRUST
Check one box:  ☐ INVESTMENT   REAL PROPERTY	Check one box:  ☐ INVESTMENT
Z IDICI NOI SKI	Z IDETROLEM
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, or Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or	Description of Business Activity or
City or Other Precise Location of Real Property	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 	\$2,000 - \$10,000 \$10,001 - \$100,000 \$\frac{1}{2}\$
\$100,001 - \$1,000,000 ACQUIRED DISPOSED	\$100,001 - \$1,000,000 ACQUIRED DISPOSED
₩ Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Property Ownership/Deed of Trust Stock Partnership	Property Ownership/Deed of Trust Stock Partnership
Leasehold Yrs. remaining Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Macheck box if additional schedules reporting investments or real property are attached
comments: See attached	

FPPC Form 700 (2011/2012) Sch. A-2 FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE A-2

FORM FUD MICHAEL ANTONINI

INVESTMENTS, INCOME and
ASSETS of
BUSINESS ENTITIES/TRUSTS
ANTONIN: FAMILY 1997
TRUST

DENTAL BUILDING-

OWNERSHIP IS AS FOLLOWS:

TEUST
LINDA and MICHAEL
ANTONINI, TRUSTEES

2590 2011/7 GINA MARIE M. ANTONINI
a single woman

JOHN MICHAEL ANTUNINI

a morried man as separate

property

ownership is As FULLOWS:

75% JOHN MICHAEL ANTONINI

2590 ANTONIN' FAMILY 1997 TRUST Linda one Michael Antonini trustees

# SCHEDULE C Income, Loans, & Business Positions (Other than Gifts and Travel Payments)



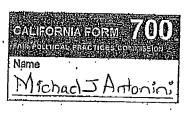
► 11:INCOMEREGEIVED.	► 1 INGOME RECEIVED:
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
Viewin C. Grouncy, DOS, PC	City and County of Francisco
ADDRESS (Business Address Acceptable)	ADDRESS (Rusiness Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	
SUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION OF
administrative assistant	City and County Planning
GROSS INCOME RECEIVED	
\$500 - \$1,000 \$1,001 - \$10,000	GROSS INCOME RECEIVED    \$500 - \$1,000
\$10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
0010105047011 500 1111111111111111111111111111111	
CONSIDERATION FOR WHICH INCOME WAS RECEIVED  Solary Spouse's or registered domestic partner's income	CONSIDERATION FOR WHICH INCOME WAS RECEIVED  Spouse's or registered domestic partner's income
- LINGO ONTONION	1 ' '
Loan repayment Partnership w.fc	☐ Loan repayment ☐ Partnership
Sale of(Real property, car, boal, etc.)	Sale of(Real property, car, boat, etc.)
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
Transaction of the transaction o	Commission of Mental income, list each source of \$10,000 or more
Other	Other
(Describe)	(Describe)
F: 2: LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIO	
retail installment or credit card transaction, made in the l	iding institutions, or any indebtedness created as part of a
members of the public without regard to your official state	us. Personal loans and loans received not in a lender's
regular course of business must be disclosed as follows:	
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
n n n	
Michael J. Hodonni, DDS, Inc.	5 % □ None 60 months
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
retirement plan administration	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
\$500 - \$1,000	
\$1,001 - \$10,000	City
₹\$10,001 - \$100,000	Guaranlor
OVER \$100,000	rested account belance of
	Dolher harriwer in prefit
·	2 Maring Priory
Community	
Comments:	

# SCHEDULE C Income, Loans, & Business Positions (Other than Gifts and Travel Payments)

CALIFORNIA FORM	
FAIR POLITICAL PRACTICES COMMISSI	an a
Name	HADITE E
Michael J. Antonia	فعر
1:12 CUACI 2 12 LIVIOLO 1	<u>)</u>

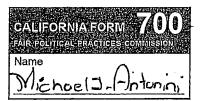
> MEINCOME RECEIVED	INCOME RECEIVED
NAME OF SOURCE OF INCOME	Michael J. Antonini DRJ. Jac
Michael J. Antonini, DOS, Inc.  ADDRESS (Business Address Acceptable)	) Michael J Antonini DRJ, Joec ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
dentistry	dentistry Your Business Position
YOUR BUSINESS POSITION	
Chairman/employee dentut	administrative absistant
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000 ☐ \$1,001 - \$100,000 ☐ OVER \$100,000	☐ \$500 - \$1,000
	linda
CONSIDERATION FOR WHICH INCOME WAS RECEIVED  Salary Spouse's or registered domestic partner's income	CONSIDERATION FOR WHICH INCOME WAS RECEIVED  Salary  Spouse's or registered domestic partner's income
Loan repayment Partnership	☐ Loan repayment ☐ Partnership
Sale of	□ Solo of
(Real property, car, boat, etc.)	· (Real property, car, boat, etc.)
Commission or Rental Income, Ilst each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
Other	Other
(Describe)	(Describe)
I I  Z. LOANS, RECEIVED OR OUTSTANDING DURING: THE REPORTING PERIOD	
* You are not required to report loans from commercial lend	
retail installment or credit card transaction, made in the le	nder's regular course of business on terms available to
members of the public without regard to your official statu regular course of business must be disclosed as follows:	s. Personal loans and loans received not in a lender's
Lawrence S. Witter Witter	INTEREST RATE  TERM (Months/Years)  5 r erme in  6.0 % None Tyears (as of 1-1-2012)
ADDRESS (Business Address Acceptable)	6.0 % □ None tyears (as of 1-1-2012)
Applicad [pasitiess Addiess Acceptance]	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
retired	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Sheet dichess
\$500 - \$1,000	City
\$1,001 - \$10,000 · · · · · · · · · · · · · · · · ·	Guarantor
<u>\$10,001 - \$100,000</u>	
OVER \$100,000	Other(Describe)
	(second)
<b>O</b> -manufacture	
Comments:	

# SCHEDULE D Income – Gifts



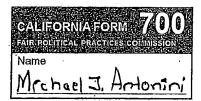
The state of the s	
NAME OF SOURCE Strada	NAME OF SOURCE
. Michael Cohen, Jessie Blout Investments	783
ADDREGS (Business Address Acceptable)	Dan Kingsley - Investments ADDRESS (Bushess Address Acceptable)
	TOUREDS (Business Advises Adventure)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
real estate investment & development	real estate development
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
1,12,11 ,5000 Junch onc Market	
1/2/11 , 50- Onc Market	1:18/11 : 6500 Dinner DIAct;
1 1 4 4	
NAME OF SOURCE	NAME OF SOURCE
Saint Ignatius College Preparatoir	JOSEPH Grenn, DMD.
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Accapiable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	
	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Secondary Coviction - Proparatory  DATE (mm/dd/yy) VALUE DESCRIPTION OF GIETIES	dentistry- Endodontics
DATE (mm/dddyy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
1/28/11 60° dinner	215/11 500 dinner The Brixton
5 0 1 11	THE OFTER
10,15,11 , 1400 cabinet dinner	
MAME OF SOURCE LOOVE name A SEO, LLC	NAME OF SOURCE
ewisW.Loeven	Lee
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Accomplable)
•	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
landuse consultant	BUSINESS ACTIVITY, IF ANY, OF SOURCE  CITY COUNTY SF  Director - Transcis m. 2005
DATE (mm/ddyy) VALUE DESCRIPTION OF GIFT(S)  cl) nner furtus  2,11,11 \$ 100 Empress of Chire;  Chinese American Voters	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
2,11,11 \$100 Empress of Chiral Chinas American Votors	a caloner
Chinese American Voters	3,13,11 , 60° Lee family dinner
	1 1 .
	<u> </u>
•	
Comments:	

### SCHEDULE D Income - Gifts



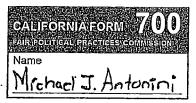
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
NAME OF SOURCE	NAME OF SOURCE Heller, Manus
trank Dal Santo, DDS, MD	Jeffrey Heller architects
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/w) VALUE DESCRIPTION OF GIFT(S)
3,2211; 50 = Junch Scala's	3,6,11 ,600 Prospect
	8 25,11 845 Bushall game
	\$
NAME OF SOURCE San Francis CO	NAME OF SOURCE MISSICO MCYCLE AT
Jim Mercurio Fort Winers	Phillesser Association
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE MISSON
Business activity if any, of source personal Yice President Stadoum Oyerations, friend	promotion, consutant District
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
dinner dinner	1 12 11 Frue dinner
3 21/11 : 60 - Hayes St Grill	4,12,11 ,500 Speechio
9,3,11,50 or toothall Treate	
/ / s	
	NAME OF POLITOR
NAME OF SOURCE	angelo, Jim.
Doue Freeman JETSETS ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
ADDRESS (Business Address Addeptable)	ADDICESS (Busiless Address Addeptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE PRINCET;	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Set design, personal friend	real property owners hipe development
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
11	4/13/11 \$5000 lunch Cafe
3 25/11 : 50° Perry's	9/13/11 ,50 = Euni Cate
	1
	\$
\$	1
Comments:	
Comments.	

# SCHEDULE D Income - Gifts



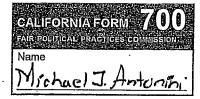
<u></u>	· · · · · · · · · · · · · · · · · · ·
► NAME OF SOURCE University of the Pacific	NAME OF SOURCE
Patrick Ferillo - Dugoni School of	E. Dennis Normandy
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE MCMber
Dean of the dental school	Patient personal friend, Service Communication
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
G 27 11 Cray dinner	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)  GIRLS TO CITY Hall Phillipine Da
6 27/11 : 6500 Olympic Club	1 6/12/11 \$ 120 - CITYHOII YNIllipine Do
8/7,11 , 700 dinner Cafe	
UITITI STO EITT CAVE	[] ——— \$
NAME OF SOURCE	► NAME OF SOURCE Adsc
Good / Sears Orthodontics	Carlo Dévita Rostaurants
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
	-
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
dentistry, orthodontics	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	
6,24,11 ,55 - reception	5,3,11 :30 perry's
Tecephien	2 JII \$ 00 PET   1
1 1 •	11,28,11 , 5500 dinner
NAME OF SOURCE	2
	NAME OF SOURCE Blatters
Meuin Growner DDS  ADDRESS (Business Address Acceptable)	David Blatteis Realty
ADDITICOS (Busiliess Addiess Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	PLICINITION ACTIVITY IF ANY OF POLICIES
	BUSINESS ACTIVITY, IF ANY, OF SOURCE. COMMENC (Q
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
المالية بركم سوم المرابع	Numer
0 28,11 :160 - Park Tovern	8,25,11 : 60 5+ Francis Eacht Club
	\$
}	
\$ l	\$
Comments:	

### SCHEDULE D. Income - Gifts



▶ NAME OF SOURCE	► NAME OF SOURCE
Alfonso Faustino	Antonio Cucalon, DIDS, MS
ADDRESS (Business Address Accept	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	. BUSINESS ACTIVITY, IF ANY, OF SOURCE
personal friend	dentistry orthodontics
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
7 17 11 Great dinner	2,30,11 ,2800 4 trickets
7/2/11 : 65- Perbacco	1 130/11 :200- GIANTIVE. CLIDS
\$	\$
	\$
NAME OF SOURCE	NAME OF SOURCE State Farm
Dean Duncan, DDS	Keith Hall- Insurance
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
dentistry oral surgery	insurance agent
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
11 120,11 , 256 44 ers vs Cardinals	12,20,11 ,55 Percy's
17 73	12,20,11 :55 Perry's
NAME OF SOURCE #, M.5.	► NAME OF SOURCE
Marcia Smolens associates	
ADDRESS (Business Address Acceptable	Sam Singer and Osso.  ADDRESS (Business Address Acceptable)
	Abbricos (Business Address Acceptable)
Business ACTIVITY, IF MY, OF SOURCE	DOSINESS ACTIVITY, IF ANY LOF SOURCE
see above	public affairs & communication,
111	Maissalunch
11,30,11 ,50 - Absinthe	12,9,11 :500 Hilton Hotel
	\$
	· · ·
	\$
•	
Comments:	. •
1	
	•

# SCHEDULE D Income - Gifts



► NAME OF SOURCE	➤ NAME OF SOURCE
Len A. Tostunor, DMD	Jason O Malley
ADDRESS (Business Address Aggentable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
dentistry, and surgeon	vatient, personal friend
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	
cocktail	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
12,211 \$ 55- reception	8 8,11 : 65 - Giants Pirate
\$	
S	\$
NAME OF SOURCE A CALLED CALLED	► NAME OF SOURCE
, ACOUCTAY ET THE	P NAME OF SOURCE
LISA Stephens University	ADDRESS (Bullet Address Association
- ATTICLE AND AND ATTICLE AND	ADDRESS (Business Address Acceptable)
_ ·	
South Control of the second	BUSINESS ACTIVITY, IF ANY, OF SOURCE
educational institution	
DATE (mm/dd/yy) VALUE  DESCRIPTION OF GIFT(S)  CUCKTAIN TECEPTION  CLOSSIC AVTOS	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
11,21,11 s 50 classic autos	
- Jaouse - J	\$
/ / *	
	ss
► NAME OF SOURCE	NAME OF SOURCE
· <del></del>	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, 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)
	\$
	\$
	1 1 6
	·
Comments;	
- Continuence	

### San Francisco **BOARD OF SUPERVISORS**

Date Printed: July 6, 2012

Date Established:

July 1, 2002

Active

### PLANNING COMMISSION

### **Contact and Address:**

Linda Avery Planning Department 1660 Mission Street San Francisco, CA 94103

Phone: (415) 558-6415 Fax: (415) 558-6409 Email: linda.avery@sfgov.org

### **Authority:**

Charter Section 4.105- per Prop D. Election March 5, 2002

### **Board Qualifications:**

The Planning Commission consists of seven voting members.

The President of the Board of Supervisors shall nominate three members to the commission.

The Mayor shall nominate four members to the commission.

Each nomination of the President of the Board of Supervisors and the Mayor is subject to the approval of the Board of Supervisors, and shall be the subject of a public hearing and vote within 60 days. If the Board fails to act on the nomination within 60 days of the date the nomination is transmitted to the Clerk of the Board of Supervisor the nominee shall be deemed approved.

The mission of the City Planning Department is to guide the orderly and prudent use of land, in both the natural and built environment, with the purpose of improving the quality of life and embracing the diverse perspectives of those who live in, work in, and visit San Francisco. The Commission shall periodically recommend to the Board of Supervisors for approval or rejection proposed amendments to the General Plan.

Report: The Commission shall periodically recommend to the Board of Supervisors for approval or rejection proposed amendments to the General Plan.

Sunset Date: None