File No	140994	Committee Item No. 6 Board Item No.
(-	D OF SUPERVISORS T CONTENTS LIST
Committee:	Rules	Date October 2, 2014
Board of Su	pervisors Meeting	Date <u>October 21,2014</u>
Cmte Boar	rd	
	Motion Resolution Ordinance Legislative Digest Budget and Legislative A Youth Commission Repol Introduction Form Department/Agency Cove MOU Grant Information Form Grant Budget Subcontract Budget Contract/Agreement Form 126 — Ethics Comm Award Letter Application Public Correspondence	er Letter and/or Report
OTHER	(Use back side if addition	nal space is needed)
	Vacancy Notice Information Sheet Porm 70D	

[Appointments, Assessment Appeals Board No. 1 - Diane Robinson and Richard Lee]

Motion appointing Diane Robinson and Richard Lee, terms ending September 4, 2017, to the Assessment Appeals Board No. 1.

MOVED, That the Board of Supervisors of the City and County of San Francisco does hereby appoint the hereinafter designated persons to serve as members of the Assessment Appeals Board No. 1, pursuant to the provisions of California Revenue and Taxation Code, Section 1620 et seq., and San Francisco Administrative Code, Section 2B.1 et seq., for the terms specified:

Diane Robinson, seat 3, succeeding herself, term expired, must have a minimum of five years professional experience in the State of California as one of the following: Certified Public Accountant or Public Accountant; licensed Real Estate Broker; Attorney; or a Property Appraiser accredited by a nationally recognized professional organization, certified by the Office of Real Estate Appraisers, or certified by the State Board of Equalization, for the unexpired portion of a three-year term ending September 4, 2017.

Richard Lee, seat 7 (Alternate Member), succeeding himself, term expired, must have a minimum of five years professional experience in the State of California as one of the following: Certified Public Accountant or Public Accountant; licensed Real Estate Broker; Attorney; or a Property Appraiser accredited by a nationally recognized professional organization, certified by the Office of Real Estate Appraisers, or certified by the State Board of Equalization, for the unexpired portion of a three-year term ending September 4, 2017.

Assessment Appears 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 2013

Complete and return this original Application to the Assessment Appeals Board
Application for Appointment to: Board 1 or Board 1 Alternate
(Please circle one) Board 2 or Board 2 Alternate
Board 3 or Board 3 Alternate
Enter your name, mailing address and daytime telephone number in the spaces provided. Because this form is a document availab or public review, you may list your business/office address, telephone number and e-mail address in lieu of your home address or other personal contact information.
Do you authorize release of your private/personal information?
Name: Diane Robinson Home Address: - 15th Asenue
Dity: San Franciaco - State: A Zip code: 94/22
Business Address: State: Zip Code:
Home Phone: 415-269-7434 Fax #:
Pager #: E-Mail Address:
Are you a United States citizen, or a resident alien who is eligible for and has applied for citizenship? 🗹 Yes 🗌 No
Have you ever been convicted of a felony in this state, or convicted of any offense which, if committed in this state, would be a felony? Yes No (If yes, please attach a statement describing the offense(s) for which you have been convicted, the date of the conviction(s), and the court(s) that convicted you.)
Pursuant to Ordinance No. 393-98 the following qualifications are required:
accountant or public accountant; (2) licensed real estate broker; (3) attorney; or (4) property appraiser accredited by a nationally recognized professional organization, or property appraiser certified by either the Office of Real Estate Appraiser or by the State Board of Equalization. Documentation of qualifying experience must be submitted with this application form. This requirement does not apply to incumbent board members nominated for appointment to their same seats. Please state your qualifications: Immurate Appraiser Language Appraiser Language Appraiser Language Appraiser Language Language Appraiser Language Langua
101 FT CLANTIAN COT
Please state your business and/or professional experience: AE a commercial real do tata
Occupation: Kal estate appraises Education: MBA Cornell University
Civic Activities: mamber, Bolden Gate Heights neighborhood association
Ethnicity (optional): Sex (optional): ☐ M DF
Other Personal Information (optional)
Would you be able to attend Day Meetings?
Appearance before the RULES COMMITTEE is a requirement before any appointment can be made.
Please Note: Your application will be retained for one year.
Date: 8/14/14 Applicant's Signature: Mare Muns
For Office Use Only: Appointed to Board #:10 eat #: Term Expires:

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Received

E-Filed 03/13/2014 16:36 10

Filing ID 150002671

Please type or print in ink.	•				(150002671)
NAME OF FILER	(LAST)		(FIRST)		(MIDDLE)
Robinson, Diane					
1. Office, Agency, or Court					
Agency Name (Do not use acronyms)					
City and County of San Fran	cisco				
Division, Board, Department, District, if	applicable		Your Position		į.
Assessment Appeals Board			Member		
► If filling for multiple positions, list bel	ow or on an attachme	ent. (Do not use	acronyms)		
Agency:			Position:		
2. Jurisdiction of Office (Check	at least one box)				
☐ State			Judge or Cour	t Commissioner (State	ewide Jurisdiction)
Multi-County			County of S S	n Francisco	
☐ City of	. ·		Other		
3. Type of Statement (Check at I	east one hox				
Annual: The period covered is Ja December 31, 2013		gh	Leaving Offi (Check one)	ce: Date Left	<u></u>
-or- The period covered is December 31, 2013	, t	through	The periodleaving of		1, 2013, through the date of
Assuming Office: Date assumed		_	The perior of leaving		, through the date
Candidate: Election Year	and of	ffice sought, if diff	erent than Part 1:		
4. Schedule Summary					
Check applicable schedules or "Non	e,"	▶ T	otal number of pages	s including this cove	er page: <u>4</u>
X Schedule A-1 - Investments – sch	edule attached	· 	Schedule C - Incor	ne Loans & Rusines	ss Positions - schedule attached
Schedule A-2 - Investments - sch			_	me – Gifts – schedule	
Schedule B - Real Property - sch			-		ayments - schedule attached
		-or-		•	•
	None - No r	reportable interes	ts on any schedule		
5. Verification					
MAILING ADDRESS STREET (Business or Agency Address Recommended - Pu	blic Document)	CITY		STATE	ZIP CODE
,	•	San Fr	ancisco	CA	94122
DAYTIME TELEPHONE NUMBER			E-MAIL ADDRESS (OPTIONA	AL)	
()			·		
I have used all reasonable diligence in particular herein and in any attached schedules in					wledge the information contained
I certify under penalty of perjury unc	ler the laws of the S	tate of Californi	a that the foregoing i	is true and correct.	
Date Signed 03/13/2014 (month. day, ye	ear)	Sig	gnature <u>Diane Rob</u> (File	oinson the orginally signed statemer	nt with your filing official.)

SCHEDULE A-1 Investments

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

	CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
	Name
l	Robinson, Diane

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Bank of America	Caterpillar
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
banking	heavy equipment manufacturer
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 Dver \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT X Stock Other	NATURE OF INVESTMENT Stock Other
(Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	(Describe) 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:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Costco	Cummins .
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
warehouse stores	engine manufacturer
FAIR MARKET VALUE	FAIR MARKET VALUE
	∑ \$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	Stock Other
(Describe) Partnership () Income Received of \$0 - \$499	(Describe) Partnership (Olncome 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:
ACQUIRED DISPOSED.	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Ford	General Electric
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
automobile manufacturer	diversified manufacturer
FAIR MARKET VALUE	FAIR MARKET VALUE
S2,000 - \$10,000 X \$10,001 - \$100,000	∑ \$2,000 - \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other(Describe)	Stock Other (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:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
•	
Comments:	

SCHEDULE A-1 Investments

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

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name	24.0
Robinson, Diane	_

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Home Depot	Intel Corporation
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Warehouse hardware store	Computer chip maker
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$100,000 Over \$1,000,000	\$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Otiner (Describe)	Stock Other (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:
/ ₂ /	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Oracle Corporation	Synovus Financial
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
software manufacturer	Regional bank
FAIR MARKET VALUE	FAIR MARKET VALUE
☒ \$2,000 - \$10,000	\$2,000 - \$10,000
☐ \$100,001 - \$1,000,0□0 ☐ Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Oth er(Describe)	Stock Other(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:
	11 / 10 / 12
ACQUIRED DISPOSED	11 / 19 / 13 // / ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
	OCCUPANT DESCRIPTION OF THE PLICENTS
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$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
NATURE OF INVESTMENT Stock Other	Stock Other
(Describe)	(Describe) Partnership (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:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
A STORY OF THE STO	11
Comments:	

SCHEDULE D Income - Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION									_
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CALIFORNIA FORM 700							aliet er ko		-1
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		100	-		-			/ â Y	A
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Name

Robinson, Diane

► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
George Weingart	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
San Francisco, CA 94122	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
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	\$
'	
/ \$	
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
P NAME OF BOUNCE (Not all Actorym)	NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
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BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
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► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
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)
/ / \$	
\$	
	·
•	•
Comments:	

Assessment Appears 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 this origina	l Application to the	Assessment Appear	
. ie	• •	r Appointment to: circle one)	Board 1 Board 2 Board 3	or Board 1 Al or Board 2 Al or Board 3 Al	ternate In Curl
for public r	name, mailing addre review, you may list y onal contact informat	our business/office address	number in the spaces s, telephone number a	provided. Because this f nd e-mail address in lieu	orm is a document available of your home address or
Do you a	uthorize release of	your private/personal inf	formation? y	res ⊠ no	
Name:	Richard	Lee	Home Address:	POB	inco
					94134
Business	Address:	· · · · · · · · · · · · · · · · · · ·	City:	State:	Zip Code:
Home Ph	one: 4:5	Work Pho	ne:	Fax #:	
		E-Mail Add	-		
Are you a	United States citiz	zen, or a resident alien wl	ho is eligible for and	has applied for citizen	ship? 🗵 Yes 🗌 No
would be (l	a felony? Yes f yes, please attac	ed of a felony in this state No h a statement describing viction(s); and the court(s	the offense(s) for w	hich you have been co	
Pursuant	t to Ordinance No	. 393-98 the following q	ualifications are re	quired:	
accountar nationally Appraiser applications same sea	nt or public account recognized profes ror by the State Bo an form. This requir	ears' professional experients (2) licensed real est sional organization, or property of Equalization. Document does not apply to the constants.	tate broker, (3) atton roperty appraiser cer sumentation of qualit incumbent board m	ney; or (4) property ap, rtified by either the Offi fying experience must embers nominated for	praiser accredited by a ice of Real Estate be submitted with this appointment to their
Please sta		and/or professional exper	101700.	or, Assessmen	t Appeals Board
Occupatio	on: <u>Av</u> 20	sty manage	U Education:	B.S Business	· .
Civic Activ	vities:		·		·
			Sex (optional):	∄M □F	· · · · · · · · · · · · · · · · · · ·
Other Per	rsonal Information (optional)	·		
How man Have you	y days a week wou attended an Asses	Day Meetings?	earings? <u>A≤</u> A eeting? X Yes	Evening meetings? How many evenings a	a week?
Ар	pearance before	the RULES COMMITTED Please Note: Your ap			ent can be made. RECEIVED
Date:	8/8/14		Signature:		AUG 0 to 2014
For Office	e Use Only: Appoi	nted to Board #:	1 1 6 eat #:	Term Ex	Dires: Anneals Board

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Received

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Please type or print in ink.

NAME OF FILER	(LAST)		(FIRST)		(MIDDLE)
Lee, Richard					
1. Office, Agency, or Court					
Agency Name (Do not use acronyn	ns)				
City and County of San Fr	ancisco				
Division, Board, Department, District	t, if applicable		Your Position		
Assessment Appeals Board	·	· ·	Member		
► If filing for multiple positions, list	below or on an attachment.	(Do not use a	cronyms)		
Agency:			Position:		· · · · · · · · · · · · · · · · · · ·
2. Jurisdiction of Office (Che	eck at least one box)				
State			Judge or Court C	ommissioner (State	wide Jurisdiction)
Multi-County			X County of San	Francisco	· · · · · · · · · · · · · · · · · · ·
City of			Other		
3. Type of Statement (Check				·	***
X Annual: The period covered is December 31, 2013	January 1, 2013, through		Leaving Office: (Check one)	Date Left	<u> </u>
-or- The period covered is December 31, 2013	s, thro	ough	The period of leaving office	•	1, 2013, through the date of
Assuming Office: Date assum	ned		The period of leaving of		, through the t
Candidate: Election Year	and offic	e sought, if diff	erent than Part 1:		
4. Schedule Summary				,	
Check applicable schedules or "N	lone."	►T	otal number of pages in	ncluding this cove	er page:1
Schedule A-1 - Investments -	schedule attached	·	Schedule C - Income,	, Loans, & Busines	s Positions – schedule atta
Schedule A-2 - Investments -	schedule attached		Schedule D - Income	- Gifts - schedule	e attached
Schedule B - Real Property -	schedule attached		Schedule E - Income	– Gifts – Travel Pa	ayments - schedule attache
		o r- portable interes	sts on any schedule		
5. Verification				· · · · · · · · · · · · · · · · · · ·	
MAILING ADDRESS STREET (Business or Agency Address Recommended	- Public Document)	CITY		STATE	ZIP CODE
		San Fr	ancisco	CA	94102
DAYTIME TELEPHONE NUMBER			E-MAIL ADDRESS (OPTIONAL)		
()	<u> </u>				
I have used all reasonable diligence herein and in any attached schedul	in preparing this statement es is true and complete. I	. I have reviev acknowledge t	ved this statement and to his is a public document.	the best of my kno	wledge the information conta
I certify under penalty of perjury	under the laws of the Sta	ite of Californ	ia that the foregoing is	true and correct.	
Date Signed _03/14/2014	tu med	Si	gnature <u>Richard Lee</u>	e originally signed Hele	nt with your filing official !
(month, a	ay, year)		(r-lie trie	originally signed statement	n woot your miny officially

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 Application	on to the Assess	sment Appeals	Board
Application for Appointm (Please circle one)		12 or	Board 1 Alte Board 2 Alte Board 3 Alte	rnate
Enter your name, mailing address and daytime for public review, you may list your business/o other personal contact information.	ffice address, telephone	number and e-mail		
Do you authorize release of your private/	personal information?	☑ yes □] no	
Name: Yosef Tahbazof	Home Add	dress:	·	· · · · · · · · · · · · · · · · · · ·
City:	Stat	e:	Zip code:	<u> </u>
Business Address: 1256 Howard Street	City:	San Francisco	State: CA	Zip Code: 94103
Home Phone:	Work Phone: 415.92	2.0200 x 111	_ Fax #: 415.92	22.0203
Pager #:	E-Mail Address: yose	of@		
Are you a United States citizen, or a resid	ent alien who is eligibl	e for and has app	lied for citizensh	ip? 🗸 Yes 🗌 No
Have you ever been convicted of a felony would be a felony? Yes No (If yes, please attach a statement the date of the conviction(s), and	describing the offense	e(s) for which you	•	
Pursuant to Ordinance No. 393-98 the t	ollowing qualification	ns are required:		
A person shall not be eligible for reshe has a minimum of five years' profession accountant or public accountant; (2) licensionally recognized professional organized professional orga	onal experience in this sed real estate broker; zation, or property app zation. Documentatior not apply to incumbent	s state as one of to (3) attorney; or (raiser certified by n of qualifying exp board members	he following: (1) 4) property appra either the Office perience must be nominated for ap	certified public aiser accredited by a of Real Estate submitted with this opointment to their
Please state your qualifications: Attorney Board #3.	practicing law in San F	-rancisco; Comm	issioner on Asse	essment Appeals
Please state your business and/or profess management experience.	sional experience: Rea	Il estate attorney	with accounting	and property
Occupation: Attorney	Edu	cation: B.S. in Co	mmerce; J.D.	· ·
Civic Activities: Campaign volunteer.		·		·
Ethnicity (optional):	Sex (op	tional): 🔽 M	□F	
Other Personal Information (optional)				<u> </u>
Would you be able to attend Day Meetings How many days a week would you be ava Have you attended an Assessment Appea	ilable for hearings? <u>As</u> ils Board meeting?	needed How ma	iny evenings a w	
Appearance before the RULES C	OMMITTEE is a reque: Your application wi	irement before a Il be retained for	i ny appoint men o <u>n</u> e yea <u>r.</u>	it can be made.
dial.c.	pplicant's Signature:_			
For Office Use Only: Appointed to Board	#: Se	at #:	Term Expir	es:

LODEL LAMBALUT

1256 Howard Street San Francisco, CA 94103 (415) 601-5529

yosef@

EDUCATION

University of California, Hastings College of the Law, San Francisco, CA Juris Doctor, 2011

Santa Clara University, Santa Clara, CA
Bachelor of Science in Commerce / Accounting, 2008

EXPERIENCE

Tahbazof Law Firm, San Francisco, CA Partner

August 2011 - Present

- San Francisco-based law firm specializing in real estate law, with experience in real
 property purchase agreements, LLC operating agreements, stipulations, settlement
 agreements, prime contracts, subcontractor agreements, lease agreements and
 employment contracts.
- Representing clients in real estate disputes and cases concerning mechanics' liens, construction defects, unlawful detainers and breach of contractual obligations.
- Proven track record of successfully negotiating settlements resulting in fair compromises and the avoidance of cumbersome litigation.

SST Investments, San Francisco, CA *Director*

August 2011 - Present

- Management and maintenance of the company's portfolio that includes several hundred residential rental units as well as commercial buildings.
- Mediation of conflicts with tenants and neighbors; management of tenant complaints and repair requests from start to finish, including the coordination of independent contractors; implementation of a custom work order tracking system.
- Lead counsel ensuring legal compliance of the company operations.
- Creation and management of project-specific construction accounting programs.
- Secured over \$10 million in financing for construction projects, and successfully led refinancing efforts for dozens of apartment buildings.
- Actively engaged in construction management, including negotiation of supply and service contracts; management of employees and contractors; utility service coordination; general oversight of quality of work.

Ross Madden Law, San Francisco, CA

May 2010 - August 2010

Paralegal

- Drafted forms of pleadings and motions.
- Data acquisition and forensic analysis used to uncover latent causes of action.
- Assisted in informal negotiations and discussions with opposing parties.

Price Waterhouse Coopers, San Francisco, CA

May 2007 - September 2007

Transfer Pricing and Corporate Accounting

- Implemented corporate guidelines and GAAP to prepare unified documents for the financial reporting of publicly traded corporations.
- Translated complex financial information into user-friendly formats for clientele.
- Researched Transfer Pricing Division guarantee agreements, capital infusion agreements and capital support agreements.

Effective Solutions, San Mateo, CA

June 2006 – September 2006

Assistant Property Manager

- Responded to and satisfied tenant requests for property repairs.
- Mediated conflicts between landlords, tenants and neighbors.
- Managed and coordinated schedules of multiple contractors and merchants

ACTIVITIES

Civic Activities: Commissioner, Assessment Appeals Board #3; Campaign Volunteer for San Francisco Mayor Newsom & Supervisor Alioto-Pier.

Non-Profit Volunteer: Shelter Network, Home Away from Homelessness

Other: Setar (Persian classical instrument), Accounting Tutor, Law School Tutor



STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

Date Received

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Filing ID 149129770

Please type or print in ink.	• •		149129770
NAME OF FILER (LAST)	(FIRST)		(MIDDLE)
Tahbazof, Yosef	•		•
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. (E	Do not use acronyms)		
Agency:	Position:		······
2. Jurisdiction of Office (Check at least one box)		·	
☐ State	Judge or Court C	Commissioner (State	ewide Jurisdiction)
Multi-County	County of San	Francisco	
X City of San Francisco	Other	· ·	·
<u></u>	· · · · · · · · · · · · · · · · · · ·		
3. Type of Statement (Check at least one box)			
Annual: The period covered is January 1, 2013, through December 31, 2013	(Check one)	: Date Left/	/
The period covered is/, throug December 31, 2013	h O The period of leaving offic	•	1, 2013, through the date of
🛛 Assuming Office: Date assumed 12 / 17 / 2013	The period of leaving of		, through the date
Candidate: Election Year and office so	ought, if different than Part 1:		·
4. Schedule Summary			· · ·
Check applicable schedules or "None."	► Total number of pages in	ncluding this cove	er page:
Schedule A-1 - Investments - schedule attached	Schedule C - Income	, Loans, & Busines	s Positions - schedule attached
Schedule A-2 - Investments - schedule attached	Schedule D - Income		
Schedule B - Real Property – schedule attached	Schedule E - Income	- Gifts - Travel Pa	ayments - schedule attached
-or- None - No reporte	able interests on any schedule		
5. Verification			······································
MAILING ADDRESS STREET	CITY	STATE	ZIP CODE
(Business or Agency Address Recommended - Public Document)	San Francisco	CA	94103
DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS (OPTIONAL)		34103
() ,		·	·
I have used all reasonable diligence in preparing this statement. It herein and in any attached schedules is true and complete. I acknowled	have reviewed this statement and to nowledge this is a public document.	the best of my know	wledge the information contained
I certify under penalty of perjury under the laws of the State of	of California that the foregoing is	true and correct.	
Date Signed 01/15/2014 (month, day, year)	Signature <u>Yosef Tahba</u>	azof originally signed statement	t with your filing official.)

CALIFORNIA FORM 700	
FAIR POLITICAL PRACTICES COMMISSION Name	N.
Tahbazof, Yosef	

Magness entity or trust 中央中央中央	▶1. BUSINESS'ENTITY OR TRUST
SYTS Investments, LLC	Tahbazof Law Firm, LLP
Name	Name
San Francisco, CA 94103	San Francisco, CA 94103
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 THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Real Estate Development & Management	Legal services
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$0 - \$1,999 \$2,000 - \$10,000	\$1,999 \$2,000 - \$10,000
\$10,001 - \$100,000 ACQUIRED DISPOSED	\$10,001 - \$100,000 ACQUIRED DISPOSED
□ \$100.001 - \$1,000,000 ☑ Over \$1,000,000	\$100,001 - \$1,000,000 OOO OOOOOOOOOOOOOOOOOOOOOOOOOO
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Partnership Sole Proprietorship X LLC Other	Partnership Sole Proprietorship LLP
YOUR BUSINESS POSITION Member; Attorney	YOUR BUSINESS POSITION Partner
> 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	□ \$0 - \$499
☐ \$500 - \$1,000 ☑ OVER \$100,000	\$500 - \$1,000 OVER \$100,000
LI \$1,001 - \$10,000 Eshesigilen/Awendersasierezoriasiessingesourgeor	>3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF THE PROPERTY OF THE PROP
INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)	INCOME OF \$10,000 OR MORE (Attach, a separate shoot if necessary)
None .	None Non
► 4. INVESTMENTS: AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT 🔯 REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity, if Investment, or	Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property	Assessor's Parcel Number or Street Address of Real Property
San Francisco	
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	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$100,000 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 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:	FPPC Form 700 (2013/2014) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov

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

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Tahbazof, Yosef

> A BUSINESS ENTITY OR TRUST:	>1. BUSINESS ENTITY OR TRUSH
SYTS Investments, LLC(CONTINUATION)	
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 THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE; \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Partnership Sole Proprietorship Other	NATURE OF INVESTMENT Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION	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	\$0 - \$499 \$10,001 - \$100,000 \$5500 - \$1,000 \$1,001 - \$10,000
S: LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000, OR MORE (Attach it superior shorts) incressory)	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a superato, shot if necessary)
	Note
> 4 INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR: 	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OF TRUST
Check one box:	Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	INVESTMENT REAL PROPERTY
Name of Business Entity, if Investment, or 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
San Francisco	
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: \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST 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	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2013/2014) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

CALIFORNIA FORM 700	
Name	1
Tahbazof, Yosef	

▶1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
SYTS Investments, LLC(CONTINUATION)	
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 THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over, \$1,000,000
NATURE OF INVESTMENT Partnership Sole Proprietorship Other	NATURE OF INVESTMENT Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
≥ 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/ITRUST)
S0 - \$499 S10,001 - \$100,000 OVER \$100,000 \$1,001 - \$10,000	\$0 - \$499
3 LIST: THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a apparato about 11 necessor)	➤ 3. LIST, THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach of expanato sheet if necessary)
None	None
▶ 4 INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT X REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity, if Investment, or 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
San Francisco 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 \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Yrs, remaining Check box if additional schedules reporting investments or real property are attached	Yrs. remaining Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2013/2014) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

CALIFORNIA FORM 70 FAIR POLITICAL PRACTICES COMMISSION	
Name	
Tahbazof, Yosef	

DI BUSINESS ENTITY OR TRUST	➤ 1. BUSINESS ENTITY OR TRUST
SYTS Investments, LLC(CONTINUATION)	
Name	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	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
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAID MARKET VALUE (5 APPLICABLE LIGHT DATE)
SO - \$1,999	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000	\$2,000 - \$10,000
\$10,001 - \$100,000 ACQUIRED DISPOSED	S10,001 - \$100,000 ACQUIRED DISPOSED \$100,001 - \$1,000,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Partnership Sole Proprietorship Other	Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
► 2 □ DENTIEY 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	\$10,001 - \$100,000
☐ \$500 - \$1,000 ☐ OVER \$100,000	\$500 - \$1,000 OVER \$100,000
S1,001 - \$10,000 S1,000 S1,000	>3 LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF
INCOME OF \$10,000 OR MORE (Attach a separate shoot (Fracessay))	INCOME OF \$10,000 OR MORE; (Attach a separate shoot // necessary)
None	None
DARINVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR	▶ 4: INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR
LEASED BY THE BUSINESS ENTITY OF TRUST	LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT X REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity, If Investment, or	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
Assessor's Parcel Number or Street Address of Real Property	Assessor's Parcer Number of Street Address of Rear Property
San Francisco 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	\$2,000 - \$10,000
S10,001 - \$100,000	\$10,001 - \$100,000
\$100.001 - \$1,000,000 ACQUIRED DISPOSED Over \$1.000,000	\$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST	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	Check box if additional schedules reporting investments or real property are attached
	FPPC Form 700 (2013/2014) Sch. A-2
Comments:	FPPC Advice Email: advice@fppc.ca.gov

CALIFORNIA FORM: 700	
FAIR POLITICAL PRACTICES COMMISSION Name	
Tahbazof, Yosef	_

► 1: BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
SYTS Investments, LLC(CONTINUATION)	·
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 THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Partnership Sole Proprietorship Other	NATURE OF INVESTMENT Partnership Sole Proprietorship Other YOUR BUSINESS POSITION
<u> </u>	
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 ☐ \$500 - \$1,000 ☐ OVER \$100,000 ☐ \$1,001 - \$10,000	\$0 - \$499
➤ 3 LIST. THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a sopprete sheet)! necessary).	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)
None	□ None
4 INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR
Check one box:	Check one box:
☐ INVESTMENT 🎇 REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity, if Investment, or 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
San Francisco 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	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	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	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2013/2014) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov

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

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	J.
Name	-
Tahbazof, Yosef	_

> AINCOME RECEIVED	> 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
SST Investments, LLC	
ADDRESS (Business A ddress Acceptable)	ADDRESS (Business Address Acceptable)
San Francisco, CA 94103	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Property Management & Development	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Property Manager, Legal Compliance Officer	.
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
S500 - \$1,000 S1,001 - \$10,000	\$1,001 - \$10,000
∑ \$10,001 - \$100,000 ☐ OVER \$100,000	OVER \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income	Salary Spouse's or registered domestic partner's income
Loan repayment Partnership	Loan repayment Partnership
Sale of(Real property, car, boal, etc.)	Sale of(Real property, car, boat, etc.)
(Near property, car, book etc.)	, Last property, car, boat, etc.y
Commission or Rental Income, list each source of \$10.000 or more	Commission or Rental Income, list each source of \$10,000 or more
	.
Other(Describe)	Other(Describe)
,	
DAY HI TO AN STREET WED BOTH OUT STANDING DURING THE TREE OR THIS	PERIOD
	al lending institutions, or any indebtedness created as part of a
	the lender's regular course of business on terms available to
members of the public without regard to your official	I status. Personal loans and loans received not in a lender's
regular course of business must be disclosed as followed	
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
	% None
ADDRESS (Business Address Acceptable)	
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
	Real PropertyStreet address
HIGHEST BALANCE DURING REPORTING PERIOD	Street dutiess
S500 - \$1,000	Cily
S1,001 - \$10,000	Guarantor
\$10,001 - \$100,000	- Contract
OVER \$100,000	Other(Describe)
	(Describe) .
Comments:	
•	·

FPPC Form 700 (2013/2014) Sch. C FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

BOARD of SUPERVISORS



City Hall
1 Dr. Carlton B. Goodlett Place, Room 244
San Francisco 94102-4689
Tel. No. 554-5184
Fax No. 554-5163
TDD/TTY No. 554-5227

VACANCY NOTICE

ASSESSMENT APPEALS BOARD NO. 1

Replaces All Previous Notices

NOTICE IS HEREBY GIVEN of the following vacancies:

Vacant seat 3, succeeding Diane Robinson, term expiring on September 1, 2014, must meet the eligibility criteria set forth in California Revenue and Taxation Code, Section 1624.05. Must have a minimum of five years professional experience in the State of California as one of the following: certified public accountant or public accountant; licensed real estate broker; attorney; or a property appraiser accredited by a nationally recognized professional organization, certified by the Office of Real Estate Appraisers, or certified by the State Board of Equalization, for a three-year term ending September 4, 2017.

Vacant seat 7 (Alternate Member), succeeding Richard Lee, term expiring on September 1, 2014, must meet the eligibility criteria set forth in California Revenue and Taxation Code, Section 1624.05. Must have a minimum of five years professional experience in the State of California as one of the following: certified public accountant or public accountant; licensed real estate broker; attorney; or a property appraiser accredited by a nationally recognized professional organization, certified by the Office of Real Estate Appraisers, or certified by the State Board of Equalization, for a three-year term ending September 4, 2017.

Vacant seat 8 (Alternate Member), succeeding Dona Crowder, resigned, must meet the eligibility criteria set forth in California Revenue and Taxation Code, Section 1624.05. Must have a minimum of five years professional experience in the State of California as one of the following: certified public accountant or public accountant; licensed real estate broker; attorney; or a property appraiser accredited by a nationally recognized professional organization, certified by the Office of Real Estate Appraisers, or certified by the State Board of Equalization, for the unexpired portion of a three-year term ending September 7, 2015.

Report: None.

Sunset Date: None.

Additional information relating to the Assessment Appeals Board No. 1 may be obtained by reviewing Administrative Code, Chapter 2B, available at http://www.sfbos.org/sfmunicodes or by visiting the Assessment Appeals Board's website at http://www.sfbos.org/aab.

Interested persons may obtain an application from the Assessment Appeals Board website at http://www.sfbos.org/aab_app or from the Rules Committee Clerk, and should be submitted to: 1 Dr. Carlton B. Goodlett Place, Room 244, San Francisco, CA 94102-4689. All applicants must be residents of San Francisco, unless otherwise stated.

Pursuant to Board of Supervisors Rules of Order 2.32 (Motion No. 05-92) all applicants applying for this Board must complete and submit, with their application, a copy (**not original**) of Form 700, Statement of Economic Interests. Applications will not be considered if a copy of Form 700 is not submitted. Form 700, Statement of Economic Interests, may be obtained at http://www.sfbos.org/form700.

Next Steps: Applicants who meet minimum qualifications will be contacted by the Rules Committee Clerk once the Rules Committee Chair determines the date of the hearing. Members of the Rules Committee will consider the appointment(s) at the meeting and applicant(s) may be asked to state their qualifications. The appointment(s) of the individual(s) who are recommended by the Rules Committee will be forwarded to the Board of Supervisors for final approval.

Please Note: Depending upon the posting date, these vacancies may have already been filled. To determine if the vacancies for this Board are still available or if you require additional information, please call the Rules Committee Clerk at (415) 554-4447.

Angela Calvillo Clerk of the Board

DATED/POSTED: August 26, 2014

San Francisco BOARD OF SUPERVISORS

Date Printed:

September 26, 2014

Date Established:

December 24, 1998

Active

ASSESSMENT APPEALS BOARD NO. 1

Contact and Address:

Dawn Duran
Assessment Appeals Board
City Hall, Room 405
San Framcsco, CA 94102

Phone: (415) 554-6778 Fax: (415) 554-6775

Email: Dawn.Duran@sfgov.org

Authority:

Administrative Code, Chapter 2B et seq. (Added by Ordinance No. 37-67; Amended by Ordinances Nos. 110-68, 82-94, 86-96, 393-98, 273-99, and 128-13) and California Revenue and Taxation Code, Section 1620-1630.

Board Qualifications:

The Assessment Appeals Board No. 1 consists of eight (8) members (five (5) regular members, and three (3) alternate members) all appointed by the Board of Supervisors. The regular members of Assessment Appeals Board No. 1 shall serve ex-officio as the regular members of Assessment Appeals Board No. 3 concurrent with their service on Assessment Appeals Board No. 1. No person may concurrently hold a seat on more than one of the three Assessment Appeals Boards.

The Board members' term of office is three years, beginning on the first Monday in September. In the event of a vacancy, the newly appointed member shall serve for the remainder of the unexpired term.

The Board shall have the following qualifications as stated in the eligibility criteria set forth in California Revenue and Taxation Code, Section 1624.05, as follows: Must have a minimum of five years professional experience in the State of California as one of the following: Certified Public Accountant or Public Accountant; licensed Real Estate Broker; Attorney; or a Property Appraiser accredited by a nationally recognized professional organization, certified by the Office of Real Estate Appraisers, or certified by the State Board of Equalization.

Hearing Officers: The regular and alternate members of the Board shall also serve as hearing

"R Board Description" (Screen Print)

San Francisco BOARD OF SUPERVISORS

officers. The Clerk shall designate members to act as hearing officers for particular applications using a rotating system designed to assure that all members with the same priority level have an equal opportunity over time to participate as hearing officers. The Clerk shall designate hearing officers in the following priority order: (1) the regular member of Assessment Appeals Board No. 3; (2) the alternate members of Assessment Appeals Board No. 3; (3) the alternate members of Assessment Appeals Board No. 1; (5) the regular members of Assessment Appeals Board No. 2; and (6) the regular members of Assessment Appeals Board No. 1. In their capacity as assessment hearing officers, the officers shall serve at the pleasure of and by contract with the Board of Supervisors.

It shall be the duty of each Assessment Appeals Board to equalize the valuation of the taxable property within the City and County for the purposes of taxation in the manner and subject to the limitations contained in Article XIII of the California State Constitution. Assessment Appeals Board No. 1 shall have jurisdiction to hear applications for reduction affecting any property on the secured or unsecured rolls without limitation. In addition, the Clerk shall exclusively assign to Assessment Appeals Board No. 1 any application for reduction that involves real property located all or in apart within Assessor's Block Nos. 1-876 or 3701-3899, not including residential property consisting of four units or less; a possessory interest; or property on the secured or unsecured roll assessed at \$50,000,000 or more.

Compensation: \$100 for each one-half day of service.

Report: Pursuant to California Revenue and Taxation Code, Section 1639, the hearing officer shall prepare a summary report of the proceedings together with a recommendation on the application and shall transmit this report and recommendation to the Clerk of the Board of Supervisors.

Sunset Clause: None.