File No.	161006	Committee Item No. 2
		Board Item No34
		BOARD OF SUPERVISORS
	AGENDA	PACKET CONTENTS LIST
Committ	tee: Rules Committee	Date September 22, 2016
Board of	f Supervisors Meeting	Date October 4, 2016
Cmte B	Soard	
	Motion Resolution Ordinance Legislative Diges Budget and Legis Legislative Analys Youth Commission Introduction Form Department/Agen MOU Grant Information Grant Budget Subcontract Budget Contract/Agreeme Form 126 – Ethics Award Letter	st Report on Report on Report on (for hearings) cy Cover Letter and/or Report on Form get ent on Commission
OTHER	(Use back side if	additional space is needed)
X	1	
Complet	ted by: Derek Evan	s Date September 16, 2016
Complet		2 1 20 0016

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

## PR

to the Assessment Appeals Board No. 1.

PREPARED IN COMMITTEE 9/22/16

Appointments, Assessment Appeals Board No. 1 - Jeffrey Morris and Eugene Valla

MOTION NO.

FILE NO. 161006

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:

Motion reappointing Jeffrey Morris and Eugene Valla, terms ending September 3, 2019.

Jeffrey Morris, seat 1, succeeding themself, 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 5, 2019.

Eugene Valla, seat 4, succeeding themself, 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 5, 2019.

Rules Committee BOARD OF SUPERVISORS

Page 1

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



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

Revised July 2013

r public review, you may list your business/office address, telephone number and e-mail address in lieu of your home address or her personal contact information.  No you authorize release of your private/personal information?    Series of your private/personal information?    Series of your private/personal information?    State:    Series of your private/personal information?    Series of your private/personal information?    Series of your private/personal information?    Series of your private/personal information in the private of your private in this state, outly be a felony?    Series of your private of a felony in this state, or convicted of any offense which, if committed in this state, outly be a felony?    Series of your private of a felony in this state, or convicted you.)  Series of your private of the convicted your private of your priv	
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Board 3 or Board 3 Alternate  The reput name, mailing address and daytime telephone number in the spaces provided. Because this form is a document available or public review, you may list your business/office address, telephone number and e-mail address in lieu of your home address or her personal contact information.  To you authorize release of your private/personal information?   To your guestess.   To your guestess and guestess.   To your guestess.   To your guestess.   To your guestess	
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	For Office Use Only: Appointed to Board #: Seat #: // Term Expires:

#### Jum associates

August 1, 2016

Rules Committee of the Board of Supervisors C/O Assessment Appeals Board Administrator City Hall, Room 405 San Francisco CA 94102

Attention: Supervisors Tang, Mar and Cohen

#### RE: Reappointment to the Assessment Appeals Board

Dear Supervisors

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

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

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

Sincerely yours,

cc. Supervisor Mark Farrell

1463 Jefferson Street San Francisco, CA 94123 T: (415) 606-9580

F: (414) 929 9511 w: JMAssociates@sbcglobal.net

### Resume of Jeffrey J. Morris

**Oualifications** 

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

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

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

Business/Professional Experience

March, 2007-

JJM Associates, San Francisco

Independent real estate consulting and investment

1981-Feb. 2007

BlackRock Realty, San Francisco (and predecessor firms)

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

> 1991-1999 Managing Director, Metric Property Management: \$2.5 billion national portfolio of multi family, office,

> > industrial and retail properties.

1981-1990

Vice President/Senior Vice President of Portfolio Management.

1971-1980

Coldwell Banker Management Corporation, San Francisco

Vice President, Appraisal-Consultation Service

Education

BA Political Science Stanford University, 1967

Civic-Charitable Activities:

2007-

Member, Assessment Appeals Board, City and County of

San Francisco [three year term]

1989-2001

Board of Directors, Golden Gate Park Stables, Inc.

[Concession with the San Francisco City Recreation and Park

Department]

Current

Marina Community Association; San Francisco

Zoological Society; California Academy of Sciences; American

Conservatory Theatre (ACT); Olympic Club Foundation

1463 Jefferson Street, San Francisco CA 94123

JJMAssociates@sbcglobal.net

V 415 606-9580

F 415 929-9511

# CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

## STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Initial Filing Received Official Use Only

> E-Filed 03/22/2016 10:37:24

Filing ID: 159343743 Please type or print in ink. NAME OF FILER (FIRST) (LAST) Morris, Jeffrey 1. Office, Agency, or Court Agency Name (Do not use acronyms) City and County of San Francisco Division, Board, Department, District, if applicable Your Position Assessment Appeals Board Member ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms) 2. Jurisdiction of Office (Check at least one box) ☐ Judge or Court Commissioner (Statewide Jurisdiction) ☐ State X County of San Francisco ☐ Multi-County \_ ☐ City of \_\_ Other. 3. Type of Statement (Check at least one box) Leaving Office: Date Left \_ X Annual: The period covered is January 1, 2015, through December 31, 2015 (Check one) O The period covered is January 1, 2015, through the date of The period covered is\_ leaving office. December 31, 2015 O The period covered is \_\_\_ through the date Assuming Office: Date assumed \_\_\_\_\_\_ of leaving office. Candidate: Election Year and office sought, if different than Part 1; 4. Schedule Summary (must complete) ► Total number of pages including this cover page: \_\_\_\_8\_ Schedules attached X Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-2 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule B - Real Property - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached -or-■ None - No reportable interests on any schedule 5. Verification MAILING ADDRESS STREET CITY STATE ZIP CODE (Business or Agency Address Recommended - Public Document) San Francisco 94123 DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS 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. Signature Jeffrey Morris Date Signed \_03/22/2016 (month, day, year) (File the originally signed statement with your filing official.)

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

Do not attach brokerage or financial statements.

CALIFORNIA FORM FAIR POLITICAL PRACTICES CO	7/0 mmiss	0
Name		
Morris, Jeffrey		

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Apple, Inc.	BlackRock Inc.
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Tech	Financial
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \[ \bar{X} \] \$10,001 - \$100,000	\$2,000 - \$10,000 X \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Describe (Describe)	X Stock Other (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499 ☐ Income Received of \$500 or More (Report on Schedule C)	Partnership   Income Received of \$0 - \$499   Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
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ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Chevron	Coach Inc.
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Energy	retail
FAIR MARKET VALUE	FAIR MARKET VALUE
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NAME OF BUSINESS ENTITY  Comcast Corp.  GENERAL DESCRIPTION OF THIS BUSINESS  Communication  FAIR MARKET VALUE  X \$2,000 - \$10,000	NAME OF BUSINESS ENTITY  Costco Corp.  GENERAL DESCRIPTION OF THIS BUSINESS  Retail  FAIR MARKET VALUE  □ \$2,000 - \$10,000

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

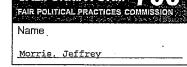
Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
The property of the second contraction of th
Name
Morris, Jeffrey

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Pepsico	T Rowe Price Group Inc.
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Food	Financial
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \times \$100,000 \times \$100,000 \times \$100,000 \times \$1,000,000 \times \$1,000,000	☐ \$2,000 - \$10,000 ☐ \$10,000 ☐ Over \$1,000,000
[] \$100,001 - \$1,000,000 · [] Over \$1,000,000	[ 5 100,000 - \$1,000,000 ] Over \$1,000,000
NATURE OF INVESTMENT  X Stock Other	NATURE OF INVESTMENT  X Stock Other
(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:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
	Starbucks
Sales Force Com GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Tech	Food
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000  \overline{X}  \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X   Stock	X Stock Other
(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)
O Middlig (100%) for \$1 4555 of Midd (1445) on conducto of	, and the control of
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
, loads the	,040,125
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
US Bancorp	Union Pacific Corp.
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Financial	Transportation
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	☐ \$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
MATURE OF INDICATION	NATURE OF INVESTMENT
NATURE OF INVESTMENT  X Stock Other	NATURE OF INVESTMENT  Stock Other
. (Describe)	(Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O income Received of \$500 or More (Report on Schedule C)	income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
·	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
•	I <b>A</b>
Comments:	

FPPC Form 700 (2015/2016) Sch. A-1 FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

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
Visa Inc.	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Financial	
FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$\begin{array}{cccccccccccccccccccccccccccccccccccc	FAIR MARKET VALUE  \$2,000 - \$10,000  \$10,001 - \$100,000  \$100,001 - \$1,000,000  Over \$1,000,000
NATURE OF INVESTMENT  X Stock Other (Describe)	NATURE OF INVESTMENT  Stock Other (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	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE  \$2,000 - \$10,000 \$10,001 - \$100,000  \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE  \$2,000 - \$10,000  \$10,001 - \$1,000,000  Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT  Stock Other (Describe)
(Describe)  Partnership () Income Received of \$0 - \$499  O income Received of \$500 or More (Report on Schedule C)	☐ Partnership ◯ Income Received of \$0 - \$499 ○ Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE  \$2,000 - \$10,000  \$10,001 - \$100,000  \$100,001 - \$1,000,000  Over \$1,000,000	FAIR MARKET VALUE  \$2,000 - \$10,000  \$10,001 - \$100,000  \$100,001 - \$1,000,000  Over \$1,000,000
NATURE OF INVESTMENT Stock Other (Describe)	NATURE OF INVESTMENT Stock Other (Describe)
Partnership O Income Received of \$0 - \$499 O income Received of \$500 or More (Report ön 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:
//	ACQUIRED DISPOSED
Committee	1

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

Do not attach brokerage or financial statements.

FAIR POLITICAL PRACTICES COMMISSION	
Name	
Morris, Jeffrey	

CALIFORNIA FORM

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
PNC Financial Services	Proctor & Gamble
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Financial	Consumer Products
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 X \$10,001 - \$100,000	\$2,000 - \$10,000 X \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
	The state of the s
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other (Describe)	X Stock Other (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:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Qualcomm Inc.	Verizon Communications
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Tech	Communications
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000   \$10,001 - \$100,000	\$2,000 - \$10,000 X \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Qver \$1,000,000
[] \$100,001 - \$1,000,000 [] Over \$1,000,000	
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other	X Stock Other
(Describe) Partnership (Income Received of \$0 - \$499	(Describe)  Partnership () 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 .
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Visa Inc.	Wells Fargo Inc.
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Financial	Financial
	Financial
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \times \$10,001 - \$100,000	☐ \$2,000 - \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	5100,001 - \$1,000,000 Over \$1,000,000
ALATUDE OF INVENTAGE	MATURE OF INDEPOSITATION
NATURE OF INVESTMENT  Stock Other	NATURE OF INVESTMENT  X Stock Other
(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)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
	•
Comments:	

## 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
Morris, Jeffrey

► NAME OF BUSINESS ENTITY	· ► NAME OF BUSINESS ENTITY
Accenture PLC	Amazon Inc.
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Financial	Tech/Retail
FAIR MARKET VALUE	FAIR MARKET VALUE
<b>X</b> \$10,000 - \$10,000 <b>X</b> \$100,000	☐ \$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
	NATION OF AUGUSTALITY
NATURE OF INVESTMENT  Stock Other	NATURE OF INVESTMENT  X Stock Other
(Describe)	(Describe)
Partnership C 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:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
•	
Credit Suisse GENERAL DESCRIPTION OF THIS BUSINESS	Dick's Sporting Goods Inc.  GENERAL DESCRIPTION OF THIS BUSINESS
	GENERAL DESCRIPTION OF THIS BUSINESS
Financial	Retail .
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \overline{X}\$10,001 - \$100,000	\$2,000 - \$10,000 [X] \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT  X Stock Other	NATURE OF INVESTMENT  X Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED .
, to do in the	/iodelites sign of the
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
EBay Inc.	Oracle Inc.
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Tech/Retail	Tech
FAIR MARKET VALUE	FAIR MARKET VALUE
FAIR MARKET VALUE    \$2,000 - \$10,000     \$10,001 - \$100,000	FAIR MARKET VALUE
FAIR MARKET VALUE  \$2,000 - \$10,000  \$10,001 - \$1,000,000  Over \$1,000,000	\$2,000 - \$10,000 <u>X</u> \$10,001 - \$100,000
<u>\$2,000 - \$10,000</u> <u>\$10,001 - \$100,000</u>	\$2,000 - \$10,000 <u>X</u> \$10,001 - \$100,000
\$2,000 - \$10,000	☐ \$2,000 - \$10,000
□ \$2,000 - \$10,000       □ \$100,001 - \$100,000         □ \$100,001 - \$1,000,000       □ Over \$1,000,000         NATURE OF INVESTMENT       □ Other         □ Stock       □ Other	☐ \$2,000 - \$10,000
\$2,000 - \$10,000	☐ \$2,000 - \$10,000
\$2,000 - \$10,000       ▼ \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000         NATURE OF INVESTMENT       ▼ Stock         ▼ Stock       Other         (Describe)	\$2,000 - \$10,000       ▼ \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000         NATURE OF INVESTMENT       ▼ Stock       Other         (Describe)       Obscribe
\$2,000 - \$10,000       ▼ \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000         NATURE OF INVESTMENT       ▼ Stock         ○ Other       (Describe)         Partnership ○ Income Received of \$0 - \$499	\$2,000 - \$10,000       ▼ \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000         NATURE OF INVESTMENT       ▼ (Describe)         Partnership ○ Income Received of \$0 - \$499
\$2,000 - \$10,000       ▼ \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000         NATURE OF INVESTMENT       ▼ Stock         ○ Other       (Describe)         Partnership       ○ Income Received of \$0 - \$499         ○ Income Received of \$500 or More (Report on Schedule C)	\$2,000 - \$10,000       ▼ \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000         NATURE OF INVESTMENT       ▼ Stock         ▼ Stock       Other         (Describe)       Other         ○ Income Received of \$0 - \$499         ○ Income Received of \$500 or More (Report on Schedule C)
\$2,000 - \$10,000   X  \$10,001 - \$100,000   S100,001 - \$1,000,000   Over \$1,000,000   Over \$1,000,000	\$2,000 - \$10,000   X \$10,001 - \$100,000     \$100,001 - \$1,000,000   Over \$1,000,000     NATURE OF INVESTMENT   X Stock
\$2,000 - \$10,000       ▼ \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000         NATURE OF INVESTMENT       ▼ Stock         ○ Other       (Describe)         Partnership       ○ Income Received of \$0 - \$499         ○ Income Received of \$500 or More (Report on Schedule C)	\$2,000 - \$10,000       ▼ \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000         NATURE OF INVESTMENT       ▼ Stock         ▼ Stock       Other         (Describe)       Other         ○ Income Received of \$0 - \$499         ○ Income Received of \$500 or More (Report on Schedule C)

## 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
Morris, Jeffrey

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Walt Disney Co.	FedEx Corp.
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Retail	Delivery
FAIR MARKET VALUE	FAIR MARKET VALUE
☐ \$2,000 - \$10,000	☐ \$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
(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:
1 1 1 1	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
General Electric Co.	Google Inc.
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Industrial	Tech ·
FAIR MARKET VALUE	FAIR MARKET VALUE
X \$2,000 - \$10,000	☐ \$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT .
X Stock Other (Describe)	X 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:
IF AT LICABLE, CIGT DATE.	I ALLEGADE, EIST DALE.
ACQUIRED DISPOSED	ACCURED PROPOSED
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Home Depot Inc.	Intel Corp.
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Home Improvement	Tech
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	X \$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
X Stock Other	X Stock Other
(Describe)  Partnership () Income Received of \$0 - \$499	(Describe)  Partnership () Income Received of \$0 - \$499
○ Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	JF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED .
1	1
Commontes	·

## 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
Morris, Jeffrey

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
JP Morgan Chase & Co.	McDonalds Inc.
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Financial	Food
FAIR MARKET VALUE	FAIR MARKET VALUE
X \$2,000 - \$10,000 S10,001 - \$100,000	X \$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  X Stock ☐ Other	NATURE OF INVESTMENT    X   Stock   Other
(Describe)  [ Partnership O Income Received of \$0 - \$499	(Describe) Partnership (O Income Received of \$0 - \$499
Partnership   Thickner 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
Merck & Co.	Nestle
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Pharmaceutical	Food
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 X \$10,001 - \$100,000	\$2,000 - \$10,000 \times \$10,001 - \$100,000
S \$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT  X Stock Other	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)	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:
ACQUIRED DISPOSED ·	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	➤ NAME OF BUSINESS ENTITY
Nike Inc.	Pepsico
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Retail	Food
FAIR MARKET VALUE	FAIR MARKET VALUE
\$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	NATURE OF INVESTMENT
Stock Other	X Stock Other
(Describe)  Partnership () Income Received of \$0 - \$499	(Describe) Partnership () 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:
1, 1, 1, 1	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
<b>'</b>	•
Comments:	

## 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 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
Rough 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 available for 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: Cigère L. Valla Home Address: Darien Way
City: Sant nances co state: CA Zip code: 9417-1522
Business Address: NA Zip Code
Home Phone: 415 681 6880 Work Phone: MA Fax#: WA
Pager #: NA E-Mail Address: EValla @ lurie. com
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:
A person shall not be eligible for nomination for membership on an assessment appeals board unless he or she has a minimum of five years' professional experience in this state as one of the following: (1) certified public 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: PLGASU SOF APPLICATION DATUSD  AUGUST 22, 2013, ML INFUNHATION THE SAME: UKCEFMT  Please state Your business and/or professional experience: 1 For 2 45 AM, 7 MUNTHS!
Occupation: Education:
Civic Activities:
Ethnicity (optional): Sex (optional): M F
Other Personal Information (optional)
Would you be able to attend Day Meetings? The Evening meetings? The How many days a week would you be available for hearings? The How many evenings a week? Mode Have you attended an Assessment Appeals Board meeting? The No Pree Accordance.
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(3/2016 Applicant's Signature: Legelle Wolle
For Office Use Only: Appointed to Board #: Seat #: Term Expires: Revised July 2013

### CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

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

Date Initial Filing Received
Official Use Only

E-Filed 03/22/2016 09:34:45

Filing ID: 159340765

Please type or print in ink.				159340765
NAME OF FILER (LAST)		(FIRST)		(MIDDLE)
Valla, Eugene			٠	
I. 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 attac	hment. (Do not us	se acronyms)		
Agency:		Position;		• •
. Jurisdiction of Office (Check at least one box	x)			
State		☐ Judge or Co	ourt Commissioner (State	ewide Jurisdiction)
Multi-County		_ X County of _	San Francisco	
City of		Other		
		<del></del>		
3. Type of Statement (Check at least one box)	i i			
X Annual: The period covered is January 1, 2015, December 31, 2015	, through	Leaving C (Check on	Office: Date Lefte)	<u> </u>
The period covered is	, through	O The poleaving		ry 1, 2015, through the date
Assuming Office: Date assumed			eriod covered is/_ ing office.	, through the date
Candidate: Election Year a	nd office sought, if	different than Part 1:		
Schedules attached		of pages includin	g this cover page:	4
X Schedule A-1 - Investments – schedule attach			, ,	ss Positions - schedule attache
<ul> <li>Schedule A-2 - Investments - schedule attach</li> <li>Schedule B - Real Property - schedule attach</li> </ul>			come - Gifts - schedule	
	au au	Schedule E - In	come – Giis – Travel P	ayments - schedule attached
<ul> <li>-or-</li> <li>None - No reportable interests on any sc</li> </ul>	hedule			
5. Verification				
MAILING ADDRESS STREET	CITY		STATE	ZIP CODE
(Business or Agency Address Recommended - Public Document)				
DAYTIME TELEPHONE NUMBER	San	Francisco E-MAIL ADDRESS	CA	94117
( , )				
I have used all reasonable diligence in preparing this state herein and in any attached schedules is true and complete.				wledge the information containe
1 certify under penalty of perjury under the laws of t	•	,		
Date Signed 03/22/2016 (month, day, year)	-	Signature Eugene	Valla File the oridinally signed statemen	of with your filing official \

## 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
Valla, Eugene

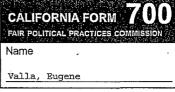
	· {
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Merrill Lynch	Merrill Lynch
, GENERAL DESCRIPTION OF THIS BUSINESS .	GENERAL DESCRIPTION OF THIS BUSINESS
E&S Valla Trust	IRA
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 X Over \$1,000,000	S100,001 - \$1,000,000 X Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
NATURE OF INVESTMENT  Stock  Other Fixed Income  (Describe)	Stock S Other Fixed Income (Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership () Income Received of \$0 - \$499 () Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
1 1	1 1 1 1
ACQUIRED DISPOSED	ACQUIRED DISPOSED .
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
·	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
_	· <del>-</del>
NATURE OF INVESTMENT.  Stock Other	NATURE OF INVESTMENT Stock Other
(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)	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
	Think of Boards Livin
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAID MADICET VALUE	FAID MADIZET VALUE
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$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
NATURE OF INVESTMENT	NATURE OF INVESTMENT .
Stock Other (Describe)	Stock Other (Describe)
Partnership () Income Received of \$0 - \$499	Partnership () 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
·	
Commonte	

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

CALIFORNIA FORM 70 FAIR POLITICAL PRACTICES COMMISS	0 10й
Name .	
Valla, Eugene	

► 1. BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
PABLO 10422 LLC	
Name	Name
San Francisco, CA 94127-2522	
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
Trust, go to 2 X 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
11 .	OZNERVIE DEGOTIN HON OF THIS BOOMESO
Owns leased real property in El Cerrito, CA	TAID MADIST VALUE IF ADDITIONED IN THE
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000	\$2,000 - \$10,000
\$10,001 - \$100,000 ACQUIRED DISPOSED	\$10,001 - \$100,000 ACQUIRED DISPOSED
X \$100,001 - \$1,000,000	\$\bigcup \bigcup \bigc
Over \$1,000,000	Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Partnership Sole Proprietorship X LLC Other	Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION Manager	YOUR BUSINESS POSITION
<u></u>	<u> </u>
▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>10</u> THE ENTITY/TRUST)	► 2 IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST).
□ \$0 - \$499	\$0 - \$499 \$10,001 - \$100,000
\$500 - \$1,000 OVER \$100,000	\$500 - \$1,000 OVER \$100,000
S1,001 - \$10,000	\$1,001 - \$10,000
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF
INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)	INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)
X None or Names listed below	None or ☐ Names listed below
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR	▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR
LEASED BY THE BUSINESS ENTITY OR TRUST	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
	•
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
EAID MADIET VALUE IE ADDI ICADI E LICT DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$10,001 - \$100,000	\$10,001 - \$100,000
\$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
<del>-</del> -	
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 (2015/2016) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov
	FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

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



ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  10422 San Pablo AVe	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
0.77	
CITY .	CITY .
El Cerrito	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000  \$10,001 - \$100,000  \$100,001 - \$1,000,000  ACQUIRED DISPOSED  Over \$1,000,000	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	NATURE OF INTEREST
X Ownership/Deed of Trust Easement	Ownership/Deed of Trust Easement
Leasehold Other .	Leasehold Other .
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
	\$10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.    X   None	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  None
You are not required to report loans from commercial business on terms available to members of the public willoans received not in a lender's regular course of busine NAME OF LENDER*	
business on terms available to members of the public willoans received not in a lender's regular course of busine	ithout regard to your official status. Personal loans and ss must be disclosed as follows:
business on terms available to members of the public willoans received not in a lender's regular course of busine	ithout regard to your official status. Personal loans and ss must be disclosed as follows:
business on terms available to members of the public willoans received not in a lender's regular course of busine  NAME OF LENDER*	ithout regard to your official status. Personal loans and ss must be disclosed as follows:  NAME OF LENDER*
business on terms available to members of the public willoans received not in a lender's regular course of busine  NAME OF LENDER*  ADDRESS (Business Address Acceptable)	ithout regard to your official status. Personal loans and iss must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)
business on terms available to members of the public willoans received not in a lender's regular course of busines  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER	thout regard to your official status. Personal loans and ass must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER
business on terms available to members of the public willoans received not in a lender's regular course of busines  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE TERM (Months/Years)	thout regard to your official status. Personal loans and ass must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE TERM (Months/Years)
business on terms available to members of the public willoans received not in a lender's regular course of busines  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE TERM (Months/Years)	ithout regard to your official status. Personal loans and iss must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE TERM (Months/Years)  "" None
business on terms available to members of the public willoans received not in a lender's regular course of busines  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE TERM (Months/Years)  HIGHEST BALANCE DURING REPORTING PERIOD	thout regard to your official status. Personal loans and ass must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE TERM (Months/Years)  """  None  HIGHEST BALANCE DURING REPORTING PERIOD
business on terms available to members of the public willoans received not in a lender's regular course of busines  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE TERM (Months/Years)	thout regard to your official status. Personal loans and ass must be disclosed as follows:    NAME OF LENDER*

#### 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 1, succeeding Jeffrey Morris, term expiring on September 5, 2016, 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 5, 2019.

Vacant seat 4, succeeding Eugene Valla, term expiring on September 5, 2016, 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 5, 2019.

Vacant seat 8 (Alternate Member), succeeding Donna Crowder, resigned, 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 7, 2018.

<u>Prohibition</u>: No member shall, within the three years immediately preceding his/her appointment to the Board, have been an employee of an assessor's office.

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 <a href="http://www.sfbos.org/sfmunicodes">http://www.sfbos.org/sfmunicodes</a> or by visiting the Assessment Appeals Board's website at <a href="http://www.sfbos.org/aab">http://www.sfbos.org/aab</a>.

Interested persons may obtain an application from the Assessment Appeals Board website at <a href="http://www.sfbos.org/aab\_app">http://www.sfbos.org/aab\_app</a> 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 their Form 700, Statement of Economic Interests. Applications will not be considered if a copy of the Form 700 is not submitted. Form 700, Statement of Economic Interests, may be obtained at <a href="http://www.sfbos.org/form700">http://www.sfbos.org/form700</a>.

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, a vacancy may have already been filled. To determine if a vacancy for this Board is still available, or if you require additional information, please call the Rules Committee Clerk at (415) 554-7702.

A = Q CAAv.46 2 Angela Calvillo Clerk of the Board

DATED/POSTED: September 2, 2016

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

Date Printed: September 18, 2015

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.

"R Board Description" (Screen Print)