

File No. 161313

Committee Item No. 3

Board Item No. \_\_\_\_\_

## COMMITTEE/BOARD OF SUPERVISORS

### AGENDA PACKET CONTENTS LIST

Committee: Rules Committee

Date December 12, 2016

Board of Supervisors Meeting

Date \_\_\_\_\_

#### Cmte Board

- |                                     |                          |                                              |
|-------------------------------------|--------------------------|----------------------------------------------|
| <input type="checkbox"/>            | <input type="checkbox"/> | Motion                                       |
| <input type="checkbox"/>            | <input type="checkbox"/> | Resolution                                   |
| <input type="checkbox"/>            | <input type="checkbox"/> | Ordinance                                    |
| <input type="checkbox"/>            | <input type="checkbox"/> | Legislative Digest                           |
| <input type="checkbox"/>            | <input type="checkbox"/> | Budget and Legislative Analyst Report        |
| <input type="checkbox"/>            | <input type="checkbox"/> | Legislative Analyst Report                   |
| <input type="checkbox"/>            | <input type="checkbox"/> | Youth Commission Report                      |
| <input type="checkbox"/>            | <input type="checkbox"/> | Introduction Form (for hearings)             |
| <input type="checkbox"/>            | <input type="checkbox"/> | Department/Agency Cover Letter and/or Report |
| <input type="checkbox"/>            | <input type="checkbox"/> | MOU                                          |
| <input type="checkbox"/>            | <input type="checkbox"/> | Grant Information Form                       |
| <input type="checkbox"/>            | <input type="checkbox"/> | Grant Budget                                 |
| <input type="checkbox"/>            | <input type="checkbox"/> | Subcontract Budget                           |
| <input type="checkbox"/>            | <input type="checkbox"/> | Contract/Agreement                           |
| <input type="checkbox"/>            | <input type="checkbox"/> | Form 126 – Ethics Commission                 |
| <input type="checkbox"/>            | <input type="checkbox"/> | Award Letter                                 |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Application                                  |
| <input type="checkbox"/>            | <input type="checkbox"/> | Public Correspondence                        |

#### OTHER (Use back side if additional space is needed)

- |                                     |                          |                          |
|-------------------------------------|--------------------------|--------------------------|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>Vacancy Notice</u>    |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>Information Sheet</u> |
| <input type="checkbox"/>            | <input type="checkbox"/> | _____                    |
| <input type="checkbox"/>            | <input type="checkbox"/> | _____                    |
| <input type="checkbox"/>            | <input type="checkbox"/> | _____                    |
| <input type="checkbox"/>            | <input type="checkbox"/> | _____                    |
| <input type="checkbox"/>            | <input type="checkbox"/> | _____                    |
| <input type="checkbox"/>            | <input type="checkbox"/> | _____                    |
| <input type="checkbox"/>            | <input type="checkbox"/> | _____                    |
| <input type="checkbox"/>            | <input type="checkbox"/> | _____                    |

Completed by: Derek Evans Date December 21, 2016

Completed by: \_\_\_\_\_ Date \_\_\_\_\_

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



Board of Supervisors  
City and County of San Francisco  
1 Dr. Carlton B. Goodlett Place, Room 244  
(415) 554-5184 FAX (415) 554-5163

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**Application for Boards, Commissions, Committees, & Task Forces**

Name of Board, Commission, Committee, or Task Force: Immigrant Rights Commission

Seat # or Category (If applicable): 2 District: 5

Name: Haregu Gaime

Home Address: [REDACTED], Pittsburg, CA Zip: 94565

Home Phone: [REDACTED] Occupation: Attorney

Work Phone: 5105334919 Employer: Law Offices Of Haregu Gaime

Business Address: 427 Grand Ave Oakland, CA Zip: 94610

Business E-Mail: haregu@haregugaimelaw.com Home E-Mail: [REDACTED]

**Pursuant to Charter, Section 4.101(a)(2), Boards and Commissions established by the Charter must consist of electors (registered voters) of the City and County of San Francisco. For certain other bodies, the Board of Supervisors can waive the residency requirement.**

Check All That Apply:

Resident of San Francisco: Yes ☐ No ☒ If No, place of residence: Pittsburg

Registered Voter in San Francisco: Yes ☐ No ☐ If No, where registered: \_\_\_\_\_

**Pursuant to Charter, Section 4.101(a)(1), please state how your qualifications represent the communities of interest, neighborhoods, and the diversity in ethnicity, race, age, sex, sexual orientation, gender identity, types of disabilities, and any other relevant demographic qualities of the City and County of San Francisco:**

I am a San Francisco native, raised in the Western Addition. I entered the United States in 1986 as a refugee, and I am a bilingual Immigration attorney. In the IRC I will be representing the immigrant community, my qualification to do so stems from my academic studies, my professional practices and my personal experiences. I understand the needs of the community I am serving, but more importantly I know that we, as city, also greatly need our immigrant community members in order to survive and thrive.

**Business and/or professional experience:**

I am a practicing licensed attorney. I have had my own practice for 7 years. The focus of our office is Immigration.

**Civic Activities:**

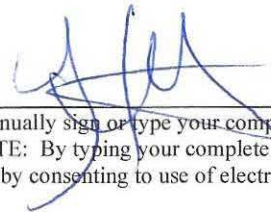
I am an active member of the Eritrean community but also the entire city.

I am a member of the Charles Houston Bar Association, I am a member of the Black Women Lawyers Association, the Queens Bench, AILA. I volunteer with each of these organization. I hold legal seminars for my church ( in Tigrgina).

Have you attended any meetings of the Board/Commission to which you wish appointment? Yes ☒ No ☐

Appointments confirmed by the Board of Supervisors require an appearance before the Rules Committee. Once your application is received, the Rules Committee Clerk will contact you when a hearing is scheduled. *(Please submit your application 10 days before the scheduled hearing.)*

Date: 11/29/2016 Applicant's Signature: (required)



(Manually sign or type your complete name.  
NOTE: By typing your complete name, you are hereby consenting to use of electronic signature.)

**Please Note:** Your application will be retained for one year. Once completed, this form, including all attachments, become public record.

**FOR OFFICE USE ONLY:**

Appointed to Seat #: \_\_\_\_\_ Term Expires: \_\_\_\_\_ Date Seat was Vacated: \_\_\_\_\_

**COVER PAGE**

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Gaime Haregu

**1. Office, Agency, or Court**

Agency Name (Do not use acronyms)

Immigrants Rights Commission

Division, Board, Department, District, if applicable

Your Position

Vice Chair

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: Position:

**2. Jurisdiction of Office (Check at least one box)**

☐ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County

☐ County of

☒ City of San Francisco

☐ Other

**3. Type of Statement (Check at least one box)**

☒ Annual: The period covered is January 1, 2015, through December 31, 2015.

-or-

The period covered is / / , through December 31, 2015.

☐ Leaving Office: Date Left / / (Check one)

☐ The period covered is January 1, 2015, through the date of leaving office.

-or-

☐ The period covered is / / , through the date of leaving office.

☐ Assuming Office: Date assumed / /

☐ Candidate: Election year and office sought, if different than Part 1:

**4. Schedule Summary (must complete) ► Total number of pages including this cover page:**

**Schedules attached**

☐ 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)

427 Grand Ave Oakland, CA 94610

Oakland

CA

94610

DAYTIME TELEPHONE NUMBER

( 415 ) 533-4919

E-MAIL ADDRESS

haregu@gmail.com

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.

Date Signed

3/22/2016  
(month, day, year)

Signature



(File the originally signed statement with your filing official.)





Board of Supervisors  
City and County of San Francisco  
1 Dr. Carlton B. Goodlett Place, Room 244  
(415) 554-5184 FAX (415) 554-5163

RECEIVED  
BOARD OF SUPERVISORS  
SAN FRANCISCO

2016 SEP 13 PM 3:48

BY Ak

### Application for Boards, Commissions, Committees, & Task Forces

Name of Board, Commission, Committee, or Task Force: Immigrant Rights

Seat # or Category (If applicable): 3 District: \_\_\_\_\_

Name: Ryan Khojasteh

Home Address: [REDACTED] San Francisco Zip: 94102

Home Phone: 408-314-4990 Occupation: Law Student

Work Phone: \_\_\_\_\_ Employer: \_\_\_\_\_

Business Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Business E-Mail: rkhojasteh@uchastings.edu Home E-Mail: [REDACTED]

**Pursuant to Charter, Section 4.101(a)(2), Boards and Commissions established by the Charter must consist of electors (registered voters) of the City and County of San Francisco. For certain other bodies, the Board of Supervisors can waive the residency requirement.**

Check All That Apply:

Resident of San Francisco: Yes ☒ No ☐ If No, place of residence: \_\_\_\_\_

Registered Voter in San Francisco: Yes ☒ No ☐ If No, where registered: \_\_\_\_\_

**Pursuant to Charter, Section 4.101(a)(1), please state how your qualifications represent the communities of interest, neighborhoods, and the diversity in ethnicity, race, age, sex, sexual orientation, gender identity, types of disabilities, and any other relevant demographic qualities of the City and County of San Francisco:**

As a first generation Iranian-American, I place a great deal of value on the commitment that immigrants display to better their lives. My parents fled Iran at the break of the 1979 Islamic Revolution so that they could have a better life in America. They worked tirelessly, given the limited opportunities they had once they came, so that my sister and I could be where we are today. This drive and work ethic is present in all immigrants to this country - just being in this country is a blessing that many of us born here take for granted. I hope to commit myself to work for the betterment of the quality of lives of immigrants in this area. With my energy, enthusiasm and background, I believe that I can be a great addition to the Immigrant Rights Commission.

**Business and/or professional experience:**

In the summer of 2013, I was a legal researcher with the Able People Foundation, compiling health care and social security policy to inform and educate members of the disabled community in the South Bay. In the fall semester of 2014, I worked as a legal intern at Santa Clara Law Group, translating from Farsi into English pro-bono work for attorneys. During my senior year of college, I worked at Congressman Honda's district office in Santa Clara. I assisted with constituent inquiries over the phone and constituent casework intake on issues regarding veterans' affairs, workers' compensation and immigration. I completed casework on USCIS and Department of State issues and I maintained communication with these agencies until green cards and student visas were issued.

**Civic Activities:**

Throughout college, I have served as a Teaching Assistant for the French Department, tutoring people in French as well as holding my own office hours. I have volunteered at Sacred Heart Nativity School, aiding low-income students from the first through third grade with their studies after school. During the summer of 2015, I traveled to Costa Rica to volunteer as a kindergarten English teacher in a makeshift school in a Nicaraguan refugee community in La Carpio. I have also for the past year been an English teacher and Citizenship Exam tutor at the Pars Equality Center in San Jose, working with new immigrants from Iran. I was honored to receive the Volunteer of the Year Award from the Refugee and Immigrant Forum of Santa Clara County.

Have you attended any meetings of the Board/Commission to which you wish appointment? Yes ☒ No ☐

Appointments confirmed by the Board of Supervisors require an appearance before the Rules Committee. Once your application is received, the Rules Committee Clerk will contact you when a hearing is scheduled. *(Please submit your application 10 days before the scheduled hearing.)*

**Date:** 9/14/2016 **Applicant's Signature: (required)** Ryan Khojasteh

(Manually sign or type your complete name.)

NOTE: By typing your complete name, you are hereby consenting to use of electronic signature.)

**Please Note:** Your application will be retained for one year. Once completed, this form, including all attachments, become public record.

**FOR OFFICE USE ONLY:**

Appointed to Seat #: \_\_\_\_\_ Term Expires: \_\_\_\_\_ Date Seat was Vacated: \_\_\_\_\_



Board of Supervisors  
City and County of San Francisco  
1 Dr. Carlton B. Goodlett Place, Room 244  
(415) 554-5184 FAX (415) 554-7714

## Application for Boards, Commissions, Committees, & Task Forces

Name of Board, Commission, Committee, or Task Force: Immigrant Rights Commission

Seat # or Category (If applicable): 9 District: N/A

Name: Elahe Enssani

Home Address: [REDACTED], San Francisco, CA Zip: 94127

Home Phone: 4[REDACTED] Occupation: Professor

Work Phone: 415-777-4287 Employer: San Francisco State University

Business Address: 1600 Holloway Ave., San Francisco, CA Zip: 94132

Business E-Mail: enssani@sfsu.edu Home E-Mail: [REDACTED]

**Pursuant to Charter Section 4.101 (a)2, Boards and Commissions established by the Charter must consist of electors (registered voters) of the City and County of San Francisco. For certain other bodies, the Board of Supervisors can waive the residency requirement.**

Check All That Apply:

Registered voter in San Francisco: Yes ☒ No ☐ If No, where registered: \_\_\_\_\_

Resident of San Francisco ☒ Yes ☐ No If No, place of residence: \_\_\_\_\_

**Pursuant to Charter section 4.101 (a)1, please state how your qualifications represent the communities of interest, neighborhoods, and the diversity in ethnicity, race, age, sex, sexual orientation, gender identity, types of disabilities, and any other relevant demographic qualities of the City and County of San Francisco:**

I was born in Tehran, Iran and came to the United States to attend graduate school. I made my home here.

I daresay that being an immigrant, has been the hardest thing I have ever done in my life.

When I came to this country, there was no community of Iranians. In the past twenty years, my passion has been to organize Iranian Americans as a community of immigrants and encourage its members to become active participants of a Civil Society.

As a professor at San Francisco State University, I educate many more immigrants and I have developed an understanding of the common themes of what it means to be an immigrant in San Francisco, especially from economic, cultural, educational, family, and gender points of view.

As a woman immigrant from a Middle Eastern country, I have come into contact with many women such as myself and have realized some of the unique issues facing women immigrants from these countries. These issues range from cultural isolation to lack of a voice in expressing their true selves and vision.

Writing and speaking on the issues regarding immigration and also mentoring recent immigrants, have always been my passion.

## Business and/or professional experience:

Education:  
Ph.D., Civil/Environmental Engineering, University of California, Berkeley. Winner of University of California's Chancellor's Patent Fund Award for partial satisfaction of doctoral dissertation.  
Master of Engineering, Civil Engineering, University of California, Berkeley. Highest Honor.  
Master of Science, Chemical Engineering, University of California, Berkeley. Highest Honor.  
Bachelor of Science, Chemical Engineering, Sharif University of Technology, Tehran, Iran. Highest Honor.  
Business and/or professional experience:  
Associate Professor and Chair, for the Civil Engineering, School of Engineering, San Francisco State University, present.  
President, Applied Technology and Science, San Francisco, California, present.  
Assistant to Chief Administrative Officer, City and County of San Francisco, San Francisco, California.  
Project Manager/Senior Engineer, Dames & Moore (now URS Corporation), San Francisco, California.  
Consultant to: United Nations Environmental Programme (UNEP), and United Nations Development Programme (UNDP).  
Past president, American Institute of Chemical Engineers (AIChE), Northern California section.

## Civic Activities:

Chair, Nowruz at City Hall (annual Celebration of Persian New Year at San Francisco City Hall)  
Co-founder, Iranian-American Chamber of Commerce (IACC).  
Member, Committee for Encyclopedia Iranica.  
- Chair, Subcommittee: Awards in Science & Engineering  
Founder, CNESSTE (Committee for Women's Education on Science, Technology and Engineering), San Francisco State University, San Francisco, California.  
Past Board Member, National Iranian American Council (NIAC)  
Board of Directors, Affordable Housing Associates, Berkeley, California, 2001-2003.

### Honors:

Selected as one of Top 100 scientists in 2005, by International Biographical Center, Cambridge, England.

Listed as one of the Extraordinary Women Engineers in the Book: Extraordinary Stories of How They Changed Our World, to be published by American Society of Civil Engineers (ASCE) in October 2005.

"Chemical/Environmental Engineering Excellence Award in Professional Development", April 21, 2009, Awarded by American Institute of Chemical Engineers (AIChE)-Northern California Section.

Listed in the Who's Who Registry of USA, New York, USA, 1992 edition.

Listed in the Who's Who of Professional and Business Women, International Biographical Center, Cambridge, England, 1992 edition.

Have you attended any meetings of the Board/Commission to which you wish appointment? Yes ☒ No ☐

For appointments by the Board of Supervisors, appearance before the RULES COMMITTEE is a requirement before any appointment can be made. (*Applications must be received 10 days before the scheduled hearing.*)

Date: 04/11/2016 Applicant's Signature: (required) Elahe Enssani

(Manually sign or type your complete name.  
NOTE: By typing your complete name, you are hereby consenting to use of electronic signature.)

**Please Note:** Your application will be retained for one year. Once Completed, this form, including all attachments, become public record.

### FOR OFFICE USE ONLY:

Appointed to Seat #: \_\_\_\_\_ Term Expires: \_\_\_\_\_ Date Seat was Vacated: \_\_\_\_\_

01/20/12



STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE

Date Initial Filing Received  
Official Use Only

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Enssani Elahe N/A

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Immigrant Rights Commission

Division, Board, Department, District, if applicable

Your Position

Commissioner

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County \_\_\_\_\_

☒ County of San Francisco

☒ City of San Francisco

☐ Other \_\_\_\_\_

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2015, through December 31, 2015.

-or-

The period covered is \_\_\_\_\_, through December 31, 2015.

☐ Leaving Office: Date Left \_\_\_\_\_ (Check one)

☐ The period covered is January 1, 2015, through the date of leaving office.

-or-

☐ The period covered is \_\_\_\_\_, through the date of leaving office.

☐ Assuming Office: Date assumed \_\_\_\_\_

☐ Candidate: Election year \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 2

Schedules attached

☐ 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)

5 Third Street, Suite 1010

San Francisco

CA

94103

DAYTIME TELEPHONE NUMBER

( 415 ) 640-7754

E-MAIL ADDRESS

elahe@a-t-s.com

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.

Date Signed

February 10, 2016

(month, day, year)

Signature



(File the originally signed statement with your filing official.)

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

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name _____

<b>1. BUSINESS ENTITY OR TRUST</b>	
Applied Technology & Science, A-T-S	
Name _____	
5 Third Street, Suite 1010	
Address (Business Address Acceptable) _____	
Check one	
<input type="checkbox"/> Trust, go to 2	<input type="checkbox"/> Business Entity, complete the box, then go to 2
<b>GENERAL DESCRIPTION OF THIS BUSINESS</b>	
FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$0 - \$1,999	____/____/15
<input type="checkbox"/> \$2,000 - \$10,000	ACQUIRED
<input type="checkbox"/> \$10,001 - \$100,000	DISPOSED
<input checked="" type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	
NATURE OF INVESTMENT	
<input type="checkbox"/> Partnership	<input type="checkbox"/> Sole Proprietorship
<input type="checkbox"/> Other _____	
YOUR BUSINESS POSITION _____	

<b>2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)</b>	
<input type="checkbox"/> \$0 - \$499	<input type="checkbox"/> \$10,001 - \$100,000
<input type="checkbox"/> \$500 - \$1,000	<input checked="" type="checkbox"/> OVER \$100,000
<input type="checkbox"/> \$1,001 - \$10,000	

<b>3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)</b>	
<input type="checkbox"/> None	or <input type="checkbox"/> Names listed below
N/A	

<b>4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST</b>	
Check one box:	
<input type="checkbox"/> INVESTMENT	<input type="checkbox"/> REAL PROPERTY
N/A	
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property _____	
Description of Business Activity or City or Other Precise Location of Real Property _____	
FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	____/____/15
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED
<input type="checkbox"/> \$100,001 - \$1,000,000	DISPOSED
<input type="checkbox"/> Over \$1,000,000	
NATURE OF INTEREST	
<input type="checkbox"/> Property Ownership/Deed of Trust	<input type="checkbox"/> Stock
<input type="checkbox"/> Leasehold	<input type="checkbox"/> Partnership
<input type="checkbox"/> Other _____	
Yrs. remaining _____	
<input type="checkbox"/> Check box if additional schedules reporting investments or real property are attached	

<b>1. BUSINESS ENTITY OR TRUST</b>	
Name _____	
Address (Business Address Acceptable) _____	
Check one	
<input type="checkbox"/> Trust, go to 2	<input type="checkbox"/> Business Entity, complete the box, then go to 2
<b>GENERAL DESCRIPTION OF THIS BUSINESS</b>	
FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$0 - \$1,999	____/____/15
<input type="checkbox"/> \$2,000 - \$10,000	ACQUIRED
<input type="checkbox"/> \$10,001 - \$100,000	DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	
NATURE OF INVESTMENT	
<input type="checkbox"/> Partnership	<input type="checkbox"/> Sole Proprietorship
<input type="checkbox"/> Other _____	
YOUR BUSINESS POSITION _____	

<b>2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)</b>	
<input type="checkbox"/> \$0 - \$499	<input type="checkbox"/> \$10,001 - \$100,000
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> OVER \$100,000
<input type="checkbox"/> \$1,001 - \$10,000	

<b>3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)</b>	
<input type="checkbox"/> None	or <input type="checkbox"/> Names listed below

<b>4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST</b>	
Check one box:	
<input type="checkbox"/> INVESTMENT	<input type="checkbox"/> REAL PROPERTY
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property _____	
Description of Business Activity or City or Other Precise Location of Real Property _____	
FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	____/____/15
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED
<input type="checkbox"/> \$100,001 - \$1,000,000	DISPOSED
<input type="checkbox"/> Over \$1,000,000	
NATURE OF INTEREST	
<input type="checkbox"/> Property Ownership/Deed of Trust	<input type="checkbox"/> Stock
<input type="checkbox"/> Leasehold	<input type="checkbox"/> Partnership
<input type="checkbox"/> Other _____	
Yrs. remaining _____	
<input type="checkbox"/> Check box if additional schedules reporting investments or real property are attached	

Comments: \_\_\_\_\_





**Board of Supervisors  
City and County of San Francisco  
1 Dr. Carlton B. Goodlett Place, Room 244  
(415) 554-5184 FAX (415) 554-7714**

### Application for Boards, Commissions, Committees, & Task Forces

Name of Board, Commission, Committee, or Task Force: Immigrant Right Commission

Seat # or Category (If applicable): Seat 11 District: \_\_\_\_\_

Name: Michelle L. Wong

Home Address: [REDACTED] San Francisco, CA Zip: 94116

Home Phone: [REDACTED] Occupation: Editor, Past Lecturer

Work Phone: 415-568-6778 Employer: Self

Business Address: 526 Magellan Ave., San Francisco, CA Zip: 94116

Business E-Mail: mlaiwong@yahoo.com Home E-Mail: [REDACTED]

**Pursuant to Charter Section 4.101 (a)2, Boards and Commissions established by the Charter must consist of electors (registered voters) of the City and County of San Francisco. For certain other bodies, the Board of Supervisors can waive the residency requirement.**

Check All That Apply:

Registered voter in San Francisco: Yes ☒ No ☐ If No, where registered: \_\_\_\_\_

Resident of San Francisco ☒ Yes ☐ No If No, place of residence: \_\_\_\_\_

**Pursuant to Charter section 4.101 (a)1, please state how your qualifications represent the communities of interest, neighborhoods, and the diversity in ethnicity, race, age, sex, sexual orientation, gender identity, types of disabilities, and any other relevant demographic qualities of the City and County of San Francisco:**

Please see attachment



**Business and/or professional experience:**

Please see attachment

**Civic Activities:**

Please see attachment

Have you attended any meetings of the Board/Commission to which you wish appointment?

Yes ☐ No ☒

---

For appointments by the Board of Supervisors, appearance before the RULES COMMITTEE is a requirement before any appointment can be made. (*Applications must be received 10 days before the scheduled hearing.*)

Date: 10/10/2016 Applicant's Signature: (required)



(Manually sign or type your complete name.  
NOTE: By typing your complete name, you are  
hereby consenting to use of electronic signature.)

**Please Note:** Your application will be retained for one year. Once Completed, this form, including all attachments, become public record.

---

FOR OFFICE USE ONLY:

Appointed to Seat #: \_\_\_\_\_ Term Expires: \_\_\_\_\_ Date Seat was Vacated: \_\_\_\_\_

## **Qualifications for Service**

My background is as a sociologist, educator and editor (Chinese to English and English to Chinese). As such I recognize the fact that our country was established by immigrants. In modern parlance, they were un-documented immigrants. Wave after wave of immigrants built this society. Immigrants have enabled our country to thrive like no other. Also, we are not a homogenous population like no other. Many Americans seem to have forgotten those facts and have engaged in scapegoating immigrants for our shortcomings generally and conveniently. The national conversation on immigration needs to be re-aligned with these truths. It would be gratifying to be able to contribute to such a social change by participating in immigrant-focused local policies and perhaps even influencing national immigration policies.

## **Business and/or professional experience:**

### **Lecturer**

National Taipei Teachers College (National Taipei University of Education)

February , 1988 to June, 1999.

Mandarin teacher, Drew High School, San Francisco

January , 2014 to May, 2014

### **Author**

The Other Choice in the Future – Virtual class

Journal of National Taipei Teachers College, Volume X , June, 1997 (in Chinese)

Co-op Program with Hi-Tech Business: A Case Study of the Co-op program between LaGuardia Community College and IBM.

Journal of National Taipei Teachers College, Volume XIII, June 2000, 311-332 National Taipei Teachers College (in English)

### **Translator/Interpreter**

Mercy High School, San Francisco (English to Chinese)

August, 2014 to date

Pro bono assistant to Jackson Wong, Attorney at Law, Immigration Law practice

2006 to date

### **Publications Translator and Editor**

Publisher ThingsAsian Press, San Francisco and Hong Kong (English to Chinese)

January, 2009 to date

H is for Hong Kong, 2009

Lost & Found Hong Kong, 2009

Co-editor (Chinese to English) for series: The Grave Robbers Chronic

Vol. 1 2011, Vol.2 2011, Vol.3 2013, Vol.4 2013, Vol. 5 2014, Vol.6 2014

### **Civic Activities:**

#### **U.S. China People's Friendship Association- South Bay Chapter**

Fostering relationships to enhance understanding between scholars, authors and others between the U.S. and China and Chinese students at Stanford and other universities.

**AM1400** (the only Chinese language radio station in the Bay Area). Discussions are in progress for a single episode or series on the sociological aspects of the changing demographics of the Chinese population in the Bay Area, including the Peninsula and South Bay.

**People to People:** Hosting elite athletes from China. Last contingent from China in 2015 are members of the National Tennis Team of China who came to compete at the U.S. Open and a tournament at Stanford.

**Organizer and Translator** for Legend Kung Fu of Newark, CA and other Chinese martial arts organizations such as the San Francisco Wushu Team. Co-team leader for U.S. Wushu Team members from the West Coast to the 2014 World Wushu Games at Chizhou, Anhwei, China.

**Translator** for Mercy High School of San Francisco for communications with its sister school and other educational institutions in China.

**Advisor** to the San Francisco Chinese Club of Chinatown assisting monolingual, un-skilled, semi-skilled, underemployed and seniors to access social services and provide cultural programs.



COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Wong Michelle Wong

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Office of Civic Engagement and Immigrant Affairs

Division, Board, Department, District, if applicable

Immigrant Right 'Commission

Your Position

Seat 11

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

2. Jurisdiction of Office (Check at least one box)

- ☐ State ☐ Judge or Court Commissioner (Statewide Jurisdiction)  
☐ Multi-County \_\_\_\_\_ ☐ County of \_\_\_\_\_  
☒ City of San Francisco ☐ Other \_\_\_\_\_

3. Type of Statement (Check at least one box)

- ☒ **Annual:** The period covered is January 1, 2015, through December 31, 2015.  
-or- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2015.  
☐ **Assuming Office:** Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_  
☐ **Leaving Office:** Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)  
○ The period covered is January 1, 2015, through the date of leaving office.  
-or-  
○ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date 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: \_\_\_\_\_

Schedules attached

- ☒ **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

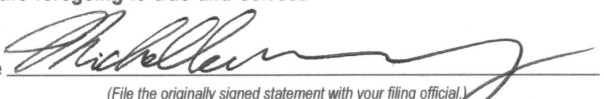
5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)  
[REDACTED] San Francisco CA 94116  
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS  
( [REDACTED] [REDACTED] )

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.

Date Signed 10/10/2016  
(month, day, year)

Signature   
(File the originally signed statement 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 \_\_\_\_\_

## ▶ NAME OF BUSINESS ENTITY

Charles Schwab Co,

GENERAL DESCRIPTION OF THIS BUSINESS

Managed stock investment

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)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/15      \_\_\_\_/\_\_\_\_/15  
ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

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

NATURE OF INVESTMENT

- ☐ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/15      \_\_\_\_/\_\_\_\_/15  
ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

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

NATURE OF INVESTMENT

- ☐ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/15      \_\_\_\_/\_\_\_\_/15  
ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

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

NATURE OF INVESTMENT

- ☐ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/15      \_\_\_\_/\_\_\_\_/15  
ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

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

NATURE OF INVESTMENT

- ☐ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/15      \_\_\_\_/\_\_\_\_/15  
ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

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

NATURE OF INVESTMENT

- ☐ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/15      \_\_\_\_/\_\_\_\_/15  
ACQUIRED      DISPOSED

Comments: \_\_\_\_\_



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

<b>CALIFORNIA FORM 700</b>
FAIR POLITICAL PRACTICES COMMISSION
Name _____

▶ 1. BUSINESS ENTITY OR TRUST

Jackson Wong Trust

Name

526 Magellan Ave., San Francisco, CA 94116

Address (Business Address Acceptable)

Check one

☒ Trust, go to 2      ☐ Business Entity, complete the box, then go to 2

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

\_\_\_\_/\_\_\_\_/15  
ACQUIRED

\_\_\_\_/\_\_\_\_/15  
DISPOSED

NATURE OF INVESTMENT

☐ Partnership    ☐ Sole Proprietorship    ☐ \_\_\_\_\_ Other

YOUR BUSINESS POSITION \_\_\_\_\_

▶ 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

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

☐ None    or    ☐ Names listed below

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT

☒ REAL PROPERTY

25-27 Morrell Place, San Francisco

Name of Business Entity, if Investment, or  
Assessor's Parcel Number or Street Address 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

\_\_\_\_/\_\_\_\_/15  
ACQUIRED

\_\_\_\_/\_\_\_\_/15  
DISPOSED

NATURE OF INTEREST

☒ Property Ownership/Deed of Trust    ☐ Stock    ☐ Partnership

☐ Leasehold \_\_\_\_\_  
Yrs. remaining

☐ Other \_\_\_\_\_

☐ Check box if additional schedules reporting investments or real property are attached

▶ 1. BUSINESS ENTITY OR TRUST

Jackson Wong Attorney at Law

Name

526 Magellan Ave., San Francisco, CA 94116

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2      ☒ Business Entity, complete the box, then go to 2

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

\_\_\_\_/\_\_\_\_/15  
ACQUIRED

\_\_\_\_/\_\_\_\_/15  
DISPOSED

NATURE OF INVESTMENT

☐ Partnership    ☐ Sole Proprietorship    ☐ \_\_\_\_\_ Other

YOUR BUSINESS POSITION \_\_\_\_\_

▶ 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

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

☐ None    or    ☐ Names listed below

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT

☒ REAL PROPERTY

156 Galewood Circle, San Francisco

Name of Business Entity, if Investment, or  
Assessor's Parcel Number or Street Address 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

\_\_\_\_/\_\_\_\_/15  
ACQUIRED

\_\_\_\_/\_\_\_\_/15  
DISPOSED

NATURE OF INTEREST

☒ Property Ownership/Deed of Trust    ☐ Stock    ☐ Partnership

☐ Leasehold \_\_\_\_\_  
Yrs. remaining

☐ Other \_\_\_\_\_

☐ Check box if additional schedules reporting investments or real property are attached

Comments: \_\_\_\_\_

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

CALIFORNIA FORM **700**  
FAIR POLITICAL PRACTICES COMMISSION

Name \_\_\_\_\_

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

25-27 Morrell Place

CITY

San Francisco

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☒ Over \$1,000,000

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/15      \_\_\_\_/\_\_\_\_/15  
ACQUIRED      DISPOSED

NATURE OF INTEREST

☒ Ownership/Deed of Trust      ☐ Easement

☐ Leasehold \_\_\_\_\_  
Yrs. remaining      ☐ \_\_\_\_\_  
Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$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.

☐ None

Sophia Crawford; Jamie Panizales; Rose Kelly

David Penny

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

156 Galewood Circle

CITY

San Francisco

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☒ Over \$1,000,000

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/15      \_\_\_\_/\_\_\_\_/15  
ACQUIRED      DISPOSED

NATURE OF INTEREST

☒ Ownership/Deed of Trust      ☐ Easement

☐ Leasehold \_\_\_\_\_  
Yrs. remaining      ☐ \_\_\_\_\_  
Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$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.

☐ None

Alexei Lukban; Michelle Lukban

\* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business 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

- ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000

☐ Guarantor, if applicable

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

\_\_\_\_\_%      ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000

☐ Guarantor, if applicable

Comments: \_\_\_\_\_



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

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name  
-----------------------------------------------------------------------------------

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

- ☐ Salary      ☐ Spouse's or registered domestic partner's income  
(For self-employed use Schedule A-2.)
- ☐ Partnership (Less than 10% ownership. For 10% or greater use  
Schedule A-2.)
- ☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)
- ☐ Loan repayment
- ☐ Commission or      ☐ Rental Income, list each source of \$10,000 or more  
\_\_\_\_\_  
(Describe)
- ☐ Other \_\_\_\_\_  
(Describe)

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

- ☐ Salary      ☐ Spouse's or registered domestic partner's income  
(For self-employed use Schedule A-2.)
- ☐ Partnership (Less than 10% ownership. For 10% or greater use  
Schedule A-2.)
- ☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)
- ☐ Loan repayment
- ☐ Commission or      ☐ Rental Income, list each source of \$10,000 or more  
\_\_\_\_\_  
(Describe)
- ☐ Other \_\_\_\_\_  
(Describe)

► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*

Selene Finance

ADDRESS (Business Address Acceptable)

9990 Richmond, Suite 400, South Houston, TX 77042

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000  
☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000  
☒ OVER \$100,000

INTEREST RATE

6 %      ☐ None

TERM (Months/Years)

40 years

SECURITY FOR LOAN

- ☐ None      ☐ Personal residence

☒ Real Property

25-27 Morrell Place

Street address

San Francisco

City

☐ Guarantor

☐ Other

(Describe)

Comments: Mortgage on rental property

Member, Board of Supervisors  
District 4



KATY TANG

ORIGINAL COB.  
COPY: Leg Dup., Rules  
City and County of San Francisco BOS- Leg 0

RECEIVED  
BOARD OF SUPERVISORS  
SAN FRANCISCO  
2016 DEC -7 AM 10:19  
BY AK

---

DATE: December 7, 2016  
TO: Angela Calvillo  
Clerk of the Board of Supervisors  
FROM: Supervisor Katy Tang  
Chairperson  
RE: Rules Committee  
COMMITTEE REPORTS

---

A handwritten signature in dark ink, appearing to read "Katy Tang", is written over the "FROM:" line of the letterhead.

Pursuant to Board Rule 4.20, as Chair of the Rules Committee, I have deemed the following matters are of an urgent nature and request they be considered by the full Board on December 13, 2016, as Committee Reports:

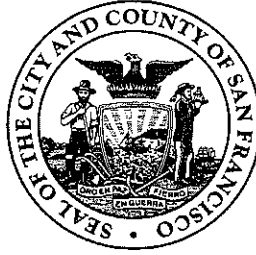
**161305 Appointments, Balboa Park Station Citizens Advisory Committee**  
Hearing to consider appointing nine members, for two-year terms ending February 28, 2019, to the Balboa Park Station Community Advisory Committee.

**161307 Appointment, Police Commission**  
Hearing to consider appointing one member, term ending April 30, 2018, to the Police Commission.

**161313 Appointments, Immigrant Rights Commission**  
Hearing to consider appointing six members, terms ending June 6, 2018, to the Immigrant Rights Commission.

These matters will be heard at the Rules Committee Special Meeting on ~~Thursday~~ <sup>Monday</sup>, December 12, 2016, at 11:30 a.m.

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

### IMMIGRANT RIGHTS COMMISSION

**Replaces All Previous Notices**

NOTICE IS HEREBY GIVEN of the following vacancies:

**Vacant seat 1**, succeeding Almudena Bernabeu, term expired, must have a demonstrated knowledge of and interest in the health, human service, educational, or employment issues that affect immigrants residing in San Francisco and shall reflect the geographic, ethnic, and sexual orientation populations in San Francisco, for the unexpired portion of a two-year term ending June 6, 2018.

**Vacant seat 2**, succeeding Haregu Gaime, term expired, must have a demonstrated knowledge of and interest in the health, human service, educational, or employment issues that affect immigrants residing in San Francisco and shall reflect the geographic, ethnic, and sexual orientation populations in San Francisco, for the unexpired portion of a two-year term ending June 6, 2018.

**Vacant seat 3**, succeeding Edward Lee, term expired, must have a demonstrated knowledge of and interest in the health, human service, educational, or employment issues that affect immigrants residing in San Francisco and shall reflect the geographic, ethnic, and sexual orientation populations in San Francisco, for the unexpired portion of a two-year term ending June 6, 2018.

**Vacant seat 5**, succeeding Leah Chen Price, term expired, must have a demonstrated knowledge of and interest in the health, human service, educational, or employment issues that affect immigrants residing in San Francisco and shall reflect the geographic, ethnic, and sexual orientation populations in San Francisco, for the unexpired portion of a two-year term ending June 6, 2018.

**Vacant seat 9**, succeeding Elahe Enssani, term expired, must be an immigrant to the United States, appointed in accordance with Charter, Section 4.101, and have a demonstrated knowledge of and interest in the health, human service, educational, or employment issues that affect immigrants residing in San Francisco and shall reflect the geographic, ethnic, and sexual orientation populations in San Francisco, for the unexpired portion of a two-year term ending June 6, 2018.



**Vacant seat 11**, succeeding Toye Moses, resigned, must be an immigrant to the United States, appointed in accordance with Charter, Section 4.101, and have a demonstrated knowledge of and interest in the health, human service, educational, or employment issues that affect immigrants residing in San Francisco and shall reflect the geographic, ethnic, and sexual orientation populations in San Francisco, for the unexpired portion of a two-year term ending June 6, 2017.

Report: Annual report to the Board of Supervisors and the Mayor on the review and evaluation of the services and programs in place for immigrants residing in San Francisco, any outstanding needs, and recommendations and plans as to a program for responding to the health, human service, and employment needs of immigrants in a manner that is not duplicative (pursuant to Administrative Code, Section 5.201(d)(5)).

Sunset Date: None.

Additional information relating to the Immigrant Rights Commission may be obtained by reviewing Administrative Code, Section 5.201, at <http://www.sfbos.org/sfmunicodes> or by visiting their website <http://www.sfgov.org/immigrant>.

Pursuant to Board of Supervisors Rules of Order 2.19 (Motion No. 05-92) all applicants applying for this Commission 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 received. Form 700, Statement of Economic Interests, may be obtained at <http://www.sfbos.org/form700>.

Interested persons may obtain an application from the Board of Supervisors website at [http://www.sfbos.org/vacancy\\_application](http://www.sfbos.org/vacancy_application) or from the Rules Committee Clerk, 1 Dr. Carlton B. Goodlett Place, Room 244, San Francisco, CA 94102-4689. Completed applications should be submitted to the Clerk of the Board. All applicants must be residents of San Francisco, unless otherwise stated.

**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 Commission is still available, or if you require additional information, please call the Rules Committee Clerk at (415) 554-7702.*

  
Angela Calvillo  
Clerk of the Board

DATED/POSTED: September 29, 2016

San Francisco  
BOARD OF SUPERVISORS

Date Printed: October 2, 2015

Date Established:

June 6, 1997

Active

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**IMMIGRANT RIGHTS COMMISSION**

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**Contact and Address:**

Adrienne Pon  
Immigrant Rights Commission  
50 Van Ness Avenue  
San Francisco, CA 94102

Phone: (415) 581-2360

Fax: (415) 581-2351

Email: [adrienne.pon@sfgov.org](mailto:adrienne.pon@sfgov.org)

**Authority:**

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Administrative Code, Section 5.201 (Ordinance No. 211-97)

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**Board Qualifications:**

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The Immigrant Rights Commission consists of fifteen (15) voting members. Eleven (11) voting members are appointed by the Board of Supervisors and the other four (4) voting members are appointed by the Mayor.

At least eight (8) members shall be immigrants to the United States who are appointed in accordance with Charter, Section 4.101. It has been past practice that six (6) of the immigrant members are appointed by the Board of Supervisors and two (2) immigrant members are appointed by the Mayor. All members must have a demonstrated knowledge of and interest in the health, human service, educational, or employment issues that affect immigrants residing in San Francisco and shall reflect the geographic, ethnic, and sexual orientation population of San Francisco.

The term of each member of the Commission shall be two years; provided, however, that the members first appointed shall, by lot, classify their terms so that eight (8) members shall serve a term of three years and seven (7) members shall serve a term of two years. In the event a vacancy occurs during the term of office of any member, a successor shall be appointed to complete the unexpired term of the office vacated in a manner similar to that for the initial member.

The Immigrant Rights Commission shall advise and make recommendations to the Board of Supervisors and the Mayor about issues affecting immigrants residing in San Francisco.

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"R Board Description" (Screen Print)

San Francisco  
BOARD OF SUPERVISORS

Report: Annual report to the Board of Supervisors and the Mayor on the review and evaluation of the services and programs in place for immigrants residing in San Francisco, any outstanding needs, and recommendations and plans as to a program for responding to the health, human service, and employment needs of immigrants in a manner that is not duplicative (pursuant to Administrative Code, Section 5.201(d)(5)).

Sunset Date: None.

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