

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

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## MEMORANDUM

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Date: April 26, 2017  
To: Honorable Members, Board of Supervisors  
From: *ACC* Angela Calvillo, Clerk of the Board  
Subject: APPOINTMENT BY THE MAYOR

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On April 25, 2017, the Mayor submitted the following complete appointments and reappointment packages:

- **Perry Lang** to the **Aging and Adult Services Commission**, term ending January 15, 2019.
- **Gustavo Serin a** to the **Aging and Adult Services Commission**, term ending July 21, 2020.
- **Jeremy Wallenberg** to the **Aging and Adult Services Commission**, term ending January 15, 2020.

Under the Board's Rules of Order, a Supervisor may request a hearing on an appointment by notifying the Clerk in writing.

Upon receipt of such notice, the Clerk shall refer the appointment to the Rules Committee so that the Board may consider and act within 30 days of the appointment, as provided in Charter, Section 3.100(18).

Please notify me in writing by **5:00 p.m., Wednesday, May 3, 2017**, if you want this appointment to be scheduled.

(Attachments)

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OFFICE OF THE MAYOR  
SAN FRANCISCO



BOS-11  
orig-Leg Cleet  
COP, Rules Cleet  
C-Pack  
EDWIN M. LEE  
MAYOR  
AC file  
Deputies

April 25, 2017

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

Dear Ms. Calvillo,

Pursuant to Section 3.100 (18) of the Charter of the City and County of San Francisco, I hereby make the following appointments and reappointment:

Perry Lang to the Aging and Adult Services Commission, assuming the seat formerly held by Edna James, for a term ending January 15, 2019

Gustavo Serin a to the Aging and Adult Services Commission for a term ending July 21, 2020

Jeremy Wallenberg to the Aging and Adult Services Commission, assuming the seat formerly held by Kaushik Roy, for a term ending January 15, 2020

I am confident that Mr. Lang, Mr. Serin a and Mr. Wallenberg, all electors of the City and County, will serve our community well. Attached are their qualifications to serve, which will demonstrate how their appointments and reappointment represent the communities of interest, neighborhoods and diverse populations of the City and County of San Francisco.

Should you have any questions related to this appointment, please contact my Deputy Chief of Staff, Francis Tsang, at (415) 554-6467.

Sincerely,

  
Edwin M. Lee  
Mayor

RECEIVED  
BOARD OF SUPERVISORS  
SAN FRANCISCO  
2017 APR 25 PM 1:21  
BY 

## GUSTAVO SERIÑÁ

Gustavo SerिÑÁ is Vice President of the *San Francisco Commission on Aging and Adult Services*. A native of Manhattan, Gustavo received a B.A. in History from the University of San Francisco and an M.A. in History from San Francisco State. In 2000, he retired after a 19-year career at Bank of America, where he held management positions in Finance, Project Management and Administration. He is a past president of the Eureka Valley Promotion Association, the oldest neighborhood group in San Francisco, and headed the organization when it sponsored and completed the Pink Triangle Park and Memorial (PTP&M). Located at the intersections of Castro, Market, and 17th streets, the PTP&M is the first free-standing memorial in the United States to gay and lesbian victims of the Nazi regime. Gustavo is an active member of the Castro/Upper Market Community Benefits District. Under the *nom de plume* Tavo Amador, he is a contributing arts writer to the *Bay Area Reporter*.

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

 Received  
 Official Use Only

 E-Filed  
 03/31/2017  
 13:55:39

 Filing ID:  
 164474255

Please type or print in ink.

 NAME OF FILER (LAST) (FIRST) (MIDDLE)  
 Serina, Gustavo
**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

Aging &amp; Adult Services Commission

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 \_\_\_\_\_ Other \_\_\_\_\_**3. Type of Statement (Check at least one box)** Annual: The period covered is January 1, 2016, through December 31, 2016 Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one)

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2016

 The period covered is January 1, 2016, through the date of leaving office. Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_ 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: 4****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)

San Francisco

CA

94102

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.

Date Signed 03/31/2017  
(month, day, year)Signature Gustavo Serina  
(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.

|                                     |  |
|-------------------------------------|--|
| <b>CALIFORNIA FORM 700</b>          |  |
| FAIR POLITICAL PRACTICES COMMISSION |  |
| Name                                |  |
| <u>Serina, Gustavo</u>              |  |

▶ NAME OF BUSINESS ENTITY  
State of California  
General Electric Corp.

GENERAL DESCRIPTION OF THIS BUSINESS  
State of California  
Manufacturing Companies

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

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
State of California  
General Electric Corp

GENERAL DESCRIPTION OF THIS BUSINESS  
State of California  
Manufacturing  
Manufacturing

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

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
State of California General Electric Corp., Toyota Corp, Bank of America, Barclay's Bank,

GENERAL DESCRIPTION OF THIS BUSINESS  
California funding, manufacturing, banking

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

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 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:  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 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:  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 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:  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 ACQUIRED                                  DISPOSED

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

# SCHEDULE A-2

## Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

**CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name \_\_\_\_\_

Serina, Gustavo

**▶ 1. BUSINESS ENTITY OR TRUST**

Gustavo Serina Revocable Trust  
Name

San Francisco, Ca 94109  
Address (Business Address Acceptable)

Check one  
 Trust, go to 2     Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

|  |   |                |                |          |          |
|--|---|----------------|----------------|----------|----------|
| <p>FAIR MARKET VALUE</p> <input type="checkbox"/> \$0 - \$1,999<br><input type="checkbox"/> \$2,000 - \$10,000<br><input type="checkbox"/> \$10,001 - \$100,000<br><input type="checkbox"/> \$100,001 - \$1,000,000<br><input type="checkbox"/> Over \$1,000,000 | <p>IF APPLICABLE, LIST DATE:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">____/____/____</td> <td style="text-align: center;">____/____/____</td> </tr> <tr> <td style="text-align: center;">ACQUIRED</td> <td style="text-align: center;">DISPOSED</td> </tr> </table> | ____/____/____ | ____/____/____ | ACQUIRED | DISPOSED |
| ____/____/____   | ____/____/____  |                |                |          |          |
| ACQUIRED   | DISPOSED  |                |                |          |          |

NATURE OF INVESTMENT  
 Partnership     Sole Proprietorship     \_\_\_\_\_ Other

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

**▶ 1. BUSINESS ENTITY OR TRUST**

Name \_\_\_\_\_

Address (Business Address Acceptable) \_\_\_\_\_

Check one  
 Trust, go to 2     Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

|  |   |                |                |          |          |
|--|---|----------------|----------------|----------|----------|
| <p>FAIR MARKET VALUE</p> <input type="checkbox"/> \$0 - \$1,999<br><input type="checkbox"/> \$2,000 - \$10,000<br><input type="checkbox"/> \$10,001 - \$100,000<br><input type="checkbox"/> \$100,001 - \$1,000,000<br><input type="checkbox"/> Over \$1,000,000 | <p>IF APPLICABLE, LIST DATE:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">____/____/____</td> <td style="text-align: center;">____/____/____</td> </tr> <tr> <td style="text-align: center;">ACQUIRED</td> <td style="text-align: center;">DISPOSED</td> </tr> </table> | ____/____/____ | ____/____/____ | ACQUIRED | DISPOSED |
| ____/____/____   | ____/____/____  |                |                |          |          |
| ACQUIRED   | 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)**

|   |  |
|---|--|
| <input type="checkbox"/> \$0 - \$499        | <input checked="" 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 |  |

**▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

|   |   |
|---|---|
| <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 |   |

**▶ 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

\_\_\_\_\_

\_\_\_\_\_

**▶ 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

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 \_\_\_\_\_

|  |   |                |                |          |          |
|--|---|----------------|----------------|----------|----------|
| <p>FAIR MARKET VALUE</p> <input type="checkbox"/> \$2,000 - \$10,000<br><input type="checkbox"/> \$10,001 - \$100,000<br><input type="checkbox"/> \$100,001 - \$1,000,000<br><input type="checkbox"/> Over \$1,000,000 | <p>IF APPLICABLE, LIST DATE:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">____/____/____</td> <td style="text-align: center;">____/____/____</td> </tr> <tr> <td style="text-align: center;">ACQUIRED</td> <td style="text-align: center;">DISPOSED</td> </tr> </table> | ____/____/____ | ____/____/____ | ACQUIRED | DISPOSED |
| ____/____/____   | ____/____/____  |                |                |          |          |
| ACQUIRED   | 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

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

Check one box:  
 INVESTMENT     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 \_\_\_\_\_

|  |   |                |                |          |          |
|--|---|----------------|----------------|----------|----------|
| <p>FAIR MARKET VALUE</p> <input type="checkbox"/> \$2,000 - \$10,000<br><input type="checkbox"/> \$10,001 - \$100,000<br><input type="checkbox"/> \$100,001 - \$1,000,000<br><input type="checkbox"/> Over \$1,000,000 | <p>IF APPLICABLE, LIST DATE:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">____/____/____</td> <td style="text-align: center;">____/____/____</td> </tr> <tr> <td style="text-align: center;">ACQUIRED</td> <td style="text-align: center;">DISPOSED</td> </tr> </table> | ____/____/____ | ____/____/____ | ACQUIRED | DISPOSED |
| ____/____/____   | ____/____/____  |                |                |          |          |
| ACQUIRED   | 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 C

### Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

|  |
|--|
| <b>CALIFORNIA FORM 700</b>                         |
| <small>FAIR POLITICAL PRACTICES COMMISSION</small> |
| Name _____   |
| Serina, Gustavo                                    |

**▶ 1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
Interest Income from Bonds  
Divident Income from Mutual Funds

ADDRESS (Business Address Acceptable)  
Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED  No Income - Business Position Only  
 \$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 Interest and Dividend Income (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  No Income - Business Position Only  
 \$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\* \_\_\_\_\_

ADDRESS (Business Address Acceptable) \_\_\_\_\_

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 \_\_\_\_\_ %  None

TERM (Months/Years) \_\_\_\_\_

SECURITY FOR LOAN  
 None  Personal residence  
 Real Property \_\_\_\_\_  
 \_\_\_\_\_ Street address  
 \_\_\_\_\_ City  
 Guarantor \_\_\_\_\_  
 Other \_\_\_\_\_ (Describe)

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