

## 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, C	ommissions, Committees	, & Task Forces
Name of Board, Commission, Commit	ttee, or Task Force: Treasury O	vesight Committee
Seat # or Category (If applicable): Pul	blic Member	District:
Name: Aimee Brown		
Home Address:		Zip: 94123
	Occupation: Retired, Board	Member & Mentor
Work Phone: 415-377-9025		
		Zip: 94123
Business E-Mail:	Home E-Mail: same	
the Charter must consist of elect San Francisco. For certain other residency requirement.  Check All That Apply:  Registered voter in San Francisco:	bodies, the Board of Superv	isors can waive the
Resident of San Francisco   Yes	s No If No, place of residen	ce:
Pursuant to Charter section 4.101 (a represent the communities of intere ethnicity, race, age, sex, sexual orie and any other relevant demographic Francisco:	est, neighborhoods, and the di entation, gender identity, types	iversity in s of disabilities,
35-year resident of San Francisco livir Single mother of daughter and serve of owner of a national woman-owned and 7-10 employees locally.	on corporate, civic and non-prof	it boards. Previously,

Business and/or professional experience:	
Dusiness and/or professional experience.	
Artemis Capital Group, Inc. ÖFounding Principal from start Ä Founder, national women-owned investment bankin municipal securities underwriters Ä Grew firm to 6 offices and 50 people; SF office of 7-largest Ä Significant experience with elected officials and City partnerships and project finance	g firm ranked among top 10 10 professionals was second
Civic Activities:	
The Bay Institute and the Aquarium of the Bay (Bay.org no Ä Elected Board member in 2012 to recently combine protect, restore and inspire the conservation of San Franci the Sierra to the sea.  Ä Serves on Finance and Development Committees for Program Committee for AOTB  Angel Island Conservancy  Ä Elected Board member and served as 2010 Co-Cha	d non-profit with the mission to sco Bay and its watershed, from or umbrella organization and
Have you attended any meetings of the Board/Commission to which yo	u wish appointment? Yes No
For appointments by the Board of Supervisors, appearance requirement before any appointment can be made. (Applic before the scheduled hearing.)	
Date: 9/10/19 Applicant's Signature: (required)	Aimee Susan Brown
Applicant o digitatore (required)	(Manually sign or type your complete name. NOTE: By typing your complete name, you are hereby consenting to use of electronic signature.)
<u>Please Note</u> : Your application will be retained for one year all attachments, become public record.	. Once Completed, this form, including

FOR OFFICE USE ONLY:
Appointed to Seat #:\_\_\_\_\_ Date Seat was Vacated:\_\_\_\_\_\_