

Young, Victor

From: Google Forms <sfbdsupvrs@gmail.com>
Sent: Monday, April 03, 2017 4:48 PM
To: SOTF, (BOS)
Subject: New Response Complaint Form

Your form has a new entry.

Here are the results.

**Complaint against
which Department
or Commission**

Treasurer and Tax Collector

**Name of individual
contacted at
Department or
Commission**

Custodian of Records

Alleged Violation

Public Records

**Sunshine Ordinance
Section:**

67.21(b)

**Please describe
alleged violation**

Aqua Terra Aeris Law Group, an environmental litigation law firm, sent the Custodian of Records of the Treasurer and Tax Collector's office a Public Records Act request on October 20, 2016. The Tax Office never responded to the request. We subsequently sent a follow-up request on December 7, 2016, and again never responded to the request. An associate from our firm contacted the Tax Office on March 20, 2017 to inquire about the delay in responding to our request. The individual on the phone informed our associate that he had to come into the Office in-person to request access to public records, or that they could fax our office a request form. Our associate went in-person to the Tax Office on March 23, 2017 to inquire about the delay and make the request again. Our associate was informed that he could not, in fact, obtain the requested information in-person and that our Public Records Act request had to be forwarded to the legal department. Our associate was further informed the Tax Office had indeed received our Public Records Act requests and assured him they would further investigate the failure to respond. To date, our office has still not received a response or any correspondence whatsoever from the Tax Collector's Office or its legal department.

Date

04/03/17

Name

Gregory Berlin

Address

828 San Pablo Avenue, Suite 115B

City Albany
Zip 94706
Telephone 650-334-5939
Email gb@atalawgroup.com

Auto-Respond to messages quickly with [Email Responder](#) for Gmail.

This email was sent via the [Google Forms Add-on](#).



October 20, 2016

**Custodian of Records
Department of Human Resources
One South Van Ness Avenue, 4th Floor
San Francisco, CA 94103**

**Custodian of Records
Office of the Treasurer and Tax Collector
City Hall – Room 140
1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102**

RE: PRA Request Regarding Medical Marijuana Dispensaries and Delivery Services

To Whom It May Concern:

On behalf of our client, Center for Advanced Public Awareness, Inc. (“CAPA”), and pursuant to the Public Records Act (Gov. Code § 6250 et seq.) and San Francisco Administrative Code § 67.1, we write to obtain public records related to the following companies, listed in Attachment A to this request, and also regarding the following topics:

- a. Permits, licenses and certifications
- b. Documents containing reference to the number of employees
- c. Corporation and Officer contact information (address and business phone numbers)
- d. Written correspondence and Communications with the business entity or its employees, officers or directors.
- e. All documents related to the businesses in Attachment A.

As this request is for the public interest, in the interest of the complete execution of all applicable laws for the protection of human health and the environment and open government, we request a waiver of any and all costs associated with the satisfaction of this request. The Department is required under prevailing law to consider this fee waiver request, and the failure to do so is an abuse of discretion subject to judicial review (See *North County Parent Organization v. Department of Education* (1994) 23 Cal.App.4th 144, 148). Please advise us of any informational or other procedural requirements that you may have in order for this request to qualify for a fee waiver. If you are unable to provide a fee waiver, please notify us immediately of any payment required for direct costs of duplication.

We may request that you allow us to bring our own equipment to scan and/or copy the information ourselves in your office, as Government Code Section 6253 states that “[p]ublic



records are open to inspection at all times during the office hours of the state or local agency and every person has a right to inspect any public record.”

If any of the documents are available in electronic format, or on the Internet, we request that you provide electronic copies or citations to the Internet web address where the document(s) can be located. In order to avoid any unnecessary burden on your agency and to expedite delivery, we would gladly accept the requested documents via electronic mail.

If all or party of the request is denied, please provide the name, address, and telephone number of the agency official responsible for the denial, and the official responsible for the appeals of denied requests. Also, if portions of the requested records are exempt from release, I request that all reasonable segregable, nonexempt portions of those records be released.

In addition, if records are withheld, I request that you specifically identify those records by providing a list of records being withheld with an accompanying explanation of the exemptions being used to withhold the requested records. This list should include the title and brief description of each of the withheld records, any date or dates associated with each of the withheld records, and a list of attachments, appendices, amendments or other materials included with each of the withheld records.

If your search fails to identify the requested records, I ask you to (1) describe in detail the search procedure, including the information about the files that were searched, (2) identify the person or persons who conducted the search, and (3) explain why a more comprehensive search of your offices would be unreasonable.

As the Public Records Act requires a response within ten (10) days, I look forward to hearing from you within that period. *See* Government Code Section 6253(c). I look forward to working with you on this document request to minimize the imposition on your staff. If you require any information to facilitate this request, or wish to discuss ways to facilitate this document production or reduce its costs, please do not hesitate to contact me at (415) 568 – 5200. I ask that you direct your response to:

Matthew Maclear
Aqua Terra Aeris Law Group
7425 Fairmount Ave.e
El Cerrito, CA 94530
mcm@atalawgroup.com

Thank you for your assistance,

/s/

Matthew C. Maclear
Aqua Terra Aeris Law Group



ATTACHMENT A

1944 Ocean Cooperative, Inc. 1944 Ocean Street San Francisco, CA 94127	2 ONE 2 212 California Street San Francisco, CA 94111	Barbary Coast Collective, Inc. 925 Mission Street San Francisco, CA 94103
BASA 1326 Grove Street San Francisco, CA 94117	Harvest 4811 Geary Boulevard San Francisco, CA 94118	Igzactly 420 527 Howard Street San Francisco, CA 94105
Ketama 14 Valencia Street San Francisco, CA 94103	Medithrive 1933 Mission Street San Francisco, CA 94103	Mission Organic Center 5258 Mission Street San Francisco, CA 94112
Re-Leaf Herbal Cooperative 1284 Mission Street San Francisco, CA 94103	Flower Power Dispensary 70 Second Street San Francisco, CA 94105	Cookies SF 5234 Mission Street San Francisco, CA 94112
SFFOGG 211 12th Street San Francisco, CA 94103	Shambhala 2441 Mission Street San Francisco, CA 94110	Urban Pharm San Francisco 122 10th Street San Francisco, CA 94103
Waterfall Wellness Health Center 1545 Ocean Avenue San Francisco, CA 94112	Apothecarium 2095 Market Street San Francisco, CA 94114	Bloom Room 471 Jessie Street San Francisco, CA 94103
Grass Roots 1077 Post Street San Francisco, CA 94109	Green Cross 4218 Mission Street San Francisco, CA 94112	Green Door 843 Howard Street San Francisco, CA 94112
Love Shack 502 14 th Street San Francisco, CA 94103	Purple Star MD 415 4 th Street San Francisco, CA 94110	San Francisco Patient Resource Center ("SPARC") 1256 Mission Street San Francisco, CA 94103
Foggy Daze Delivery Service Entity Number: C3307528 2661 Market St., #289 San Francisco, CA 94114	San Francisco Green Relief Delivery Service, Inc. Entity Number: C3833630 1559 Sloat Blvd., Suite B # 481 San Francisco, CA 94132	(Empty)



December 7, 2016

Via U.S. Mail

Matthew Maclear
Aqua Terra Aeris Law Group
828 San Pablo Avenue, Suite 115B
Albany, CA 94706
mcm@atalawgroup.com
415-568-5200

Custodian of Records
Office of the Treasurer and Tax Collector
City Hall – Room 140
1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102

RE: Response to PRA Request Regarding Medical Marijuana Dispensaries and Delivery Services

To Whom it May Concern:

On October 20, 2016 our office submitted to both the Office of the Treasurer and Tax Collector and the Department of Human Resources a Public Record Act request on behalf of our client, Center for Advanced Public Awareness, Inc. ("CAPA") (a copy of the request is attached hereto). While we received a response from the Department of Human Resources on October 26, 2016, we have still not received a response from the Office of the Treasurer and Tax Collector. Further, we have no written correspondence from your Office requesting an extension for submitting your response.

As you know, unless an extension is requested, the time to respond to a Public Records Act request is 10 days (*See* Government Code Section 2653(c)). We kindly request that you respond to the attached request within the proscribed 10-day period.

Please feel free to contact me if you have any questions regarding this request.

Sincerely,

A handwritten signature in dark ink, appearing to read "Matthew Maclear", is written over a faint, circular embossed or stamped area.

Matthew Maclear.



DENNIS J. HERRERA
City Attorney

NICHOLAS COLLA
Deputy City Attorney

Direct Dial: (415) 554-3819
Email: nicholas.colla@sfgov.org

MEMORANDUM

TO: Sunshine Ordinance Task Force
FROM: Nicholas Colla
Deputy City Attorney
DATE: April 21, 2017
RE: Complaint No. 17024 – Berlin v. Treasurer and Tax Collector's Office

COMPLAINT

Complainant Gregory Berlin ("Complainant") alleges that the Treasurer and Tax Collector's Office ("TCO") violated public records laws by failing to respond to his public records request.

COMPLAINANT FILES COMPLAINT

On April 4, 2017, Complainant filed this complaint with the Task Force alleging that TCO failed to respond to his request for public records.

JURISDICTION

TCO is a City department subject to the provisions of the Sunshine Ordinance governing public records. TCO does not contest jurisdiction to hear this complaint.

APPLICABLE STATUTORY SECTION(S)

Section 67 of the San Francisco Administrative Code:

- Section 67.21 governs responses to a public records request.

Section 6250 et seq. of the Cal. Gov't Code

- Section 6253 governs the release of public records and the timing of responses.

APPLICABLE CASE LAW

- *None*

BACKGROUND

On October 20, 2016, Complainant sent a letter addressed to the Custodians of Record for both TCO and the San Francisco Department of Human Resources, in which Complainant made a public records request for the following information for a list of several Medical Cannabis Dispensaries (list is attached as Exhibit A to Complainant's letter):

- a. Permits, licenses and certifications
- b. Documents containing reference to the number of employees

MEMORANDUM

TO: Sunshine Ordinance Task Force
DATE: April 21, 2017
PAGE: 2
RE: Complaint No. 17024 – Berlin v. Treasurer and Tax Collector's Office

- c. Corporation and Officer contact information (address and business phone numbers)
- d. Written correspondence and Communications with the business entity or its employees, officers or directors.
- e. All documents related to the businesses in Attachment A.

On December 7, 2016, after allegedly having yet to received a response, Complainant sent another letter to TCO in which he requested an update on the status of his request.

On April 4, 2017, Complainant filed this complaint with the Task Force.

On April 7, 2017, in response to the filing of this complaint, TCO Custodian of Records Debra Lew ("Ms. Lew") sent a letter to the Task Force in which she stated that TCO had no record of ever receiving the requests for public records from Ocotber 20, 2016 or December 7, 2016. Ms. Lew's letter went on to state that since learning of the request, TCO did furnish Complainant with records responsive to the request.

QUESTIONS THAT MIGHT ASSIST IN DETERMINING FACTS

- Is Complainant satisfied with the records that were eventually provided by TCO?

LEGAL ISSUES/LEGAL DETERMINATIONS

- Did TCO violate Administrative Code Section 67.21(b) and/or Government Code Section 6253(c), by failing to provide Complainant with records responsive to his request?

CONCLUSION

THE TASK FORCE FINDS THE FOLLOWING FACTS TO BE TRUE:

THE TASK FORCE FINDS THE ALLEGED VIOLATIONS TO BE **TRUE OR NOT TRUE.**

* * *

MEMORANDUM

TO: Sunshine Ordinance Task Force
 DATE: April 21, 2017
 PAGE: 3
 RE: Complaint No. 17024 – Berlin v. Treasurer and Tax Collector's Office

CHAPTER 67, SAN FRANCISCO ADMINISTRATIVE CODE (SUNSHINE ORDINANCE)**SEC. 67.21. PROCESS FOR GAINING ACCESS TO PUBLIC RECORDS; ADMINISTRATIVE APPEALS**

(a) Every person having custody of any public record or public information, as defined herein, (hereinafter referred to as a custodian of a public record) shall, at normal times and during normal and reasonable hours of operation, without unreasonable delay, and without requiring an appointment, permit the public record, or any segregable portion of a record, to be inspected and examined by any person and shall furnish one copy thereof upon payment of a reasonable copying charge, not to exceed the lesser of the actual cost or ten cents per page.

(b) *A custodian of a public record shall, as soon as possible and within ten days following receipt of a request for inspection or copy of a public record, comply with such request.* Such request may be delivered to the office of the custodian by the requester orally or in writing by fax, postal delivery, or e-mail. If the custodian believes the record or information requested is not a public record or is exempt, the custodian shall justify withholding any record by demonstrating, in writing as soon as possible and within ten days following receipt of a request, that the record in question is exempt under express provisions of this ordinance.

(c) A custodian of a public record shall assist a requester in identifying the existence, form, and nature of any records or information maintained by, available to, or in the custody of the custodian, whether or not the contents of those records are exempt from disclosure and shall, when requested to do so, provide in writing within seven days following receipt of a request, a statement as to the existence, quantity, form and nature of records relating to a particular subject or questions with enough specificity to enable a requester to identify records in order to make a request under (b). *A custodian of any public record, when not in possession of the record requested, shall assist a requester in directing a request to the proper office or staff person.*

...(l) Inspection and copying of documentary public information stored in electronic form shall be made available to the person requesting the information in any form requested which is available to or easily generated by the department, its officers or employees, including disk, tape, printout or monitor at a charge no greater than the cost of the media on which it is duplicated. Inspection of documentary public information on a computer monitor need not be allowed where the information sought is necessarily and unseparably intertwined with information not subject to disclosure under this ordinance. Nothing in this section shall require a department to program or reprogram a computer to respond to a request for information or to release information where the release of that information would violate a licensing agreement or copyright law.

CAL. PUBLIC RECORDS ACT (GOVT. CODE §§ 6250, ET SEQ.)**SEC. 6253**

(a) Public records are open to inspection at all times during the office hours of the state or local agency and every person has a right to inspect any public record, except as hereafter provided. Any reasonably segregable portion of a record shall be available for inspection by any person requesting the record after deletion of the portions that are exempted by law.

(b) Except with respect to public records exempt from disclosure by express provisions of law, each state or local agency, upon a request for a copy of records that reasonably describes an

MEMORANDUM

TO: Sunshine Ordinance Task Force
DATE: April 21, 2017
PAGE: 4
RE: Complaint No. 17024 – Berlin v. Treasurer and Tax Collector's Office

identifiable record or records, shall make the records promptly available to any person upon payment of fees covering direct costs of duplication, or a statutory fee if applicable. Upon request, an exact copy shall be provided unless impracticable to do so.

(c) Each agency, upon a request for a copy of records, shall, *within 10 days from receipt of the request, determine whether the request, in whole or in part, seeks copies of disclosable public records in the possession of the agency and shall promptly notify the person making the request of the determination and the reasons therefor.* In unusual circumstances, the *time limit* prescribed in this section may be extended by written notice by the head of the agency or his or her designee to the person making the request, setting forth the reasons for the extension and the date on which a determination is expected to be dispatched. No notice shall specify a date that would result in an extension for more than 14 days. When the agency dispatches the determination, and if the agency determines that the request seeks disclosable public records, the agency shall state the estimated date and time when the records will be made available. As used in this section, "unusual circumstances" means the following, but only to the extent reasonably necessary to the proper processing of the particular request:

- (1) The need to search for and collect the requested records from field facilities or other establishments that are separate from the office processing the request.
- (2) The need to search for, collect, and appropriately examine a voluminous amount of separate and distinct records that are demanded in a single request.
- (3) The need for consultation, which shall be conducted with all practicable speed, with another agency having substantial interest in the determination of the request or among two or more components of the agency having substantial subject matter interest therein.

**Sunshine Ordinance Task Force
Complaint Summary**

File No. 17024

Gregory Berlin V. Office of the Treasurer and Tax Collector

Date filed with SOTF: 04/03/17

Contacts information (Complainant information listed first):

gb@atalawgroup.com (Complainant)

Debra Lew, Office of the Treasurer and Tax Collector (Respondent)

File No. 17024: Complaint filed by Gregory Berlin against the Office of the Treasurer and Tax Collector, for allegedly violating Administrative Code (Sunshine Ordinance), Section 67.21, for failure to respond to a request for public records in a timely and/or complete manner.

Administrative Summary if applicable:

Complaint Attached.

Office of the Treasurer & Tax Collector
City and County of San Francisco

Legal Section



José Cisneros, Treasurer

April 10, 2017

Victor Young, Administrator
Sunshine Ordinance Task Force
1 Dr. Carlton B. Goodlett Place, Room 244
San Francisco, CA 94102-4689

Re: COMPLAINT NO. 17024

Dear Mr. Young:

Enclosed please find the City's Response to SOTF Complaint No. 17024.

If you have any questions regarding this matter, please do not hesitate to call Debra Lew, Assistant Tax Collector Attorney at (415) 554-7888.

Thank you for your assistance in this matter.

Very truly yours,

A handwritten signature in black ink, appearing to read "Eric Utley", written over a horizontal line.

Eric Utley
Legal Assistant
(415) 554-4493

RECEIVED
BOARD OF SUPERVISORS
SAN FRANCISCO
2017 APR 10 PM 4:18
BY MM

Office of the Treasurer & Tax Collector
City and County of San Francisco

Legal Section



José Cisneros, Treasurer

April 7, 2017

Victor Young, Administrator
Sunshine Ordinance Task Force
1 Dr. Carlton B. Goodlett Place, Room 244
San Francisco, CA 94102-4689

Re: COMPLAINT NO. 17024

Dear Mr. Young:

We are in receipt of your April 4, 2017 notice that Gregory Berlin filed a complaint against the Office of the Treasurer & Tax Collector (TTX) on April 3, 2017. The complaint alleges a violation of San Francisco Administrative Code (Sunshine Ordinance) section 67.21 for failure to respond to a disclosure request in a timely and/or complete manner.

Mr. Berlin states, he submitted his first records request on October 20, 2016. TTX has made a diligent search and has no record of receiving this request and is currently investigating the matter. Mr. Berlin claims he submitted a follow-up request on December 7, 2016. TTX has made a diligent search and has no record of receiving this request either. Mr. Berlin claims that on March 20, 2017 as associate of his office called TTX to inquire about the PRA request. TTX is currently investigating this claim. On March 23, 2017, Mr. Berlin's associate went to TTX's office in City Hall and delivered a letter dated October 20, 2016. TTX took receipt of this PRA request, made a copy of the October 20, 2016 letter, the Petitioner circled the three remaining entities he wanted records for on Attachment A.

Mr. Berlin's request was forwarded to the TTX Legal Section ("Legal"). Legal contacted each section within TTX that could have responsive records to Mr. Berlin's request. In turn, each of those sections reviewed its records to determine whether it had any responsive records. After a period of time, each section reported back to me, as the custodian of records, to manage and review the records identified and produced as responsive. I saw there were additional documents that could be available and made a subsequent request. Additional documents were produced.

I was out of the office on April 3, 2017. On April 4, 2017, TTX responded to this request and the recently received requests of October 20, 2016 and December 7, 2016. See Exhibit 1. On April 5, 2017, I contacted and spoke to attorneys Matthew Maclear and Greg Berlin of Aqua Terra Aeris Law Group, who confirmed receipt of the response. Mr. Maclear and I continue to confer on the redactions made. See Exhibit 2.

{March 6, 2017}
Page 2 of 2

As of this time, TTX is still investigating Mr. Berlin's claim that TTX received PRA requests on October 20, 2016, December 7, 2016 and March 20, 2017. TTX continues to thoroughly search its online mail handling system and inquire amongst relevant parties to determine if the requests were received, and so far has not located these requests. At this point, TTX has responded to Mr. Berlin's PRA request received on March 23, 2017. TTX urges the Task Force to determine that a hearing is unwarranted.

Very truly yours,



Debra D. Lew
Custodian of Records
Acting Tax Collector Attorney

Lew, Debra (TTX)

From: Lew, Debra (TTX)
Sent: Tuesday, April 04, 2017 5:12 PM
To: 'mcm@atalawgroup.com'
Subject: Shambala, Medithrive and SFFOGG PRA Response
Attachments: berlin.pra032317.resp.pdf

Dear Mr. Maclear: Please see the attached letter and documents. Please note that the City and County of San Francisco has no record of receiving your letter dated October 20 or December 7, 2016 by mail. We first became aware of the October 20, 2016 on about March 23, 2017. We are investigating what could have happened and apologize for the delay. What date were these letters sent?

The statement of compliance and documents we are producing herewith, are responsive to your office's multiple requests.

Please feel free to contact the undersigned to discuss this matter further.

Thank you.

Very truly yours,

Debra D. Lew
Acting Tax Collector Attorney
Office of the Treasurer and Tax Collector -Legal Section
P.O. Box 7426
San Francisco, CA 94120-7426
Phone: (415) 554-7888
Fax: (415) 554-5010

CONFIDENTIALITY NOTICE: The information contained in this electronic message may be confidential and may be subject to the attorney-client privilege and/or the attorney work product doctrine. It is intended only for the use of the individual or entity to whom it is addressed. If you are not the intended recipient, you are hereby notified that any use, dissemination or copying of this communication is strictly prohibited. If you have received this electronic message in error, please notify me by telephone at (415) 554-7888 and delete the original message from your e-mail system. Thank you.

Exhibit 1

RECEIVED
BOARD OF SUPERVISORS
SAN FRANCISCO
2017 APR 10 PM 4:18
BY [Signature]

Office of the Treasurer & Tax Collector
City and County of San Francisco

Legal Section



José Cisneros, Treasurer

April 4, 2017

Matthew Maclear
Gregory Berlin
828 San Pablo Ave. Ste. 115B
Albany, CA 94706

Re: Public Records Act Request

Dear Mr. Berlin:

On March 23, 2017 you submitted a Public Records Act request to The Office of the Treasurer & Tax Collector. In your request, you seek:

- "a. Permits, licenses and certifications
- b. Documents containing reference to the number of employees
- c. Corporation and Officer contact information (address and business phone numbers)
- d. Written correspondence and Communications with the business entity or its employees, officers or directors.
- e. All documents related to the business in Attachment A."

We have conducted a diligent search and located records responsive to your request. They are attached. There were no records responsive to your request of "d. Written correspondence and Communications with the business entity or its employees, officers or directors."

Please note that we have redacted confidential taxpayer information pursuant to San Francisco Business and Tax Regulations Code section 6.22-1, which states in relevant part: "The information in a taxpayer's return is confidential.... Information regarding the Tax Collector's investigation of a particular taxpayer... is also confidential. Except as permitted by this Section or as otherwise required by law, neither the Tax Collector nor his or her staff, nor any other of the City's current or former employees or agents may disclose taxpayer confidential information to any person."

Office of the Treasurer & Tax Collector
City and County of San Francisco

Legal Section



José Cisneros, Treasurer

If you have any questions about the documents provided to you, please do not hesitate to contact me at (415) 554-7888.

Very truly yours,

A handwritten signature in black ink, appearing to read "Debra D. Lew".

DEBRA D. LEW
Acting Tax Collector Attorney

Enclosures

OWNERSHIP DETAIL: List all general and/or limited partners, officers, members, or other entities that make up the ownership of the business. If there are more than three ownership entities, please attach an additional sheet (or sheets) as needed.

(FOR OFFICE USE ONLY)
Certificate No.:

Keefer Last Name (if an individual) or Entity Name (if an organization) 3140 21st St. 107 Residence Address (if an individual) or Entity Address (if an organization)		Kristine First Name (if an individual) San Francisco, CA City, State		K Middle Initial 94110 ZIP Code	
Social Security Number of partner, officer, or member		Area Code		Telephone	
IF GENERAL PARTNERSHIP, LLC, LLP, OR JOINT VENTURE: Percentage of Ownership = _____ %		IF CORPORATION: <input checked="" type="checkbox"/> Corporate Officer <input type="checkbox"/> Major Stockholder <input type="checkbox"/> Both		IF LP: <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner Percentage of Ownership = _____ %	

Power Cuellar Last Name (if an individual) or Entity Name (if an organization) 25 Careo Street Residence Address (if an individual) or Entity Address (if an organization)		Anastacia First Name (if an individual) San Francisco, CA City, State		M Middle Initial 94124 ZIP Code	
Social Security Number of partner, officer, or member		Area Code		Telephone	
IF GENERAL PARTNERSHIP, LLC, LLP, OR JOINT VENTURE: Percentage of Ownership = _____ %		IF CORPORATION: <input checked="" type="checkbox"/> Corporate Officer <input type="checkbox"/> Major Stockholder <input type="checkbox"/> Both		IF LP: <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner Percentage of Ownership = _____ %	

Naylor Last Name (if an individual) or Entity Name (if an organization) 201 Taqulpaia Ave Residence Address (if an individual) or Entity Address (if an organization)		Hasek First Name (if an individual) Mill Valley, CA City, State		D Middle Initial ZIP Code	
Social Security Number of partner, officer, or member		Area Code		Telephone	
IF GENERAL PARTNERSHIP, LLC, LLP, OR JOINT VENTURE: Percentage of Ownership = _____ %		IF CORPORATION: <input checked="" type="checkbox"/> Corporate Officer <input type="checkbox"/> Major Stockholder <input type="checkbox"/> Both		IF LP: <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner Percentage of Ownership = _____ %	

I declare under penalty of perjury, under the laws of the State of California, that I have examined this application and that the information contained herein is true and complete to the best of my knowledge and belief. I understand that misrepresentation of information is subject to a penalty of up to \$500. (San Francisco Business and Tax Regulations Code, Section 6.17-3).

AUTHORIZED REGISTRANT: [Signature]
Signature

Kristine Keefer
Print Full Name (and title, if necessary to clarify authorization)

DATE: 2-5-10

TELEPHONE: ()
Area Code Telephone



**CITY AND COUNTY OF SAN FRANCISCO
OFFICE OF THE TREASURER & TAX COLLECTOR**

City Hall, Room 140
1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102
Dial 3-1-1 within San Francisco;
(415) 701-2311 outside San Francisco
FAX: 554-6207
www.sftreasurer.org



Certificate Number: 446547

JOSÉ CISNEROS, TREASURER

UPDATES TO BUSINESS ACCOUNT INFORMATION

This form can be used for the following:

- 1 Update an address (including mailing address, business location and/or accounting record location)
- 2 Add a new location and/or fictitious business name ("dba") to an existing account
- 3 Inactivate a location or DBA for an account that is still operating at another location
- 4 Make miscellaneous changes to account information that do not involve a change in ownership
- 5 Request an adjustment to your account based upon updated or corrected payroll or registration information

DO NOT USE THIS FORM if you are no longer conducting business in San Francisco or if there has been a change in ownership or ownership type. You must use the form "Declaration of Closed Business or Change in Ownership" available at City Hall in Room 140, online at www.sftreasurer.org/businessforms, or by calling Taxpayer Assistance at (415) 554-4400.

Business Registration Certificate Number: 446547

FOR OFFICE USE ONLY:

Staff Initials: ABC

Date Processed: 09/23/13

Name: Shambala Holdings Center

(Doing Business As) Name: Shambala

1 UPDATE AN ADDRESS

Important: Please note that the Tax Collector maintains three separate types of business addresses:

- A. **Business Mailing Address Location:** Notices and other materials from the Tax Collector are sent to this address.
- B. **Business Location:** This is the physical address of the business (including home-based businesses).
- C. **Accounting Records Location:** Accounting records are kept at this address.

(Please note that a post office box can be used as the mailing address for the business, but cannot be used as the actual business location.)

A. [Redacted]
Effective Date - date that the address change took (or will take) place: (mm/dd/yyyy) 09/22/2013

Name of mail recipient: Al Shawa Phone: _____
244 Mission Street Suite # _____ City & State: SECA Zip: 94110

B. **Business Location** Check here if same as Business Mailing Address; otherwise enter address below
Effective Date - date that the address change took (or will take) place: (mm/dd/yyyy) _____

New Address (Cannot be a P.O. Box) Suite # _____ City & State _____ Zip _____

C. **Accounting Records Location** Check here if same as Business Mailing Address; otherwise enter address below
Name of mail recipient: _____ Phone: () _____

New Address (Cannot be a P.O. Box) Suite # _____ City & State _____ Zip _____

➔ **THIS FORM MUST BE SIGNED AND DATED ON THE REVERSE SIDE** ➔
(If this form is not signed by an authorized representative of the business, it will be returned without processing)

CS 1232005 03/13/09 028 0470

**CITY AND COUNTY OF SAN FRANCISCO
OFFICE OF THE TREASURER & TAX COLLECTOR**

City Hall, Room 140
1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102
Dial 3-1-1 within San Francisco;
(415) 701-2311 outside San Francisco
FAX: 554-8207
www.sftreasurer.org



Certificate Number: #474129

JOSÉ CISNEROS, TREASURER

UPDATES TO BUSINESS ACCOUNT INFORMATION

This form can be used for the following:

- 1 Update an address (including mailing address, business location and/or accounting record location)
- 2 Add a new location and/or fictitious business name ("dba") to an existing account
- 3 Inactivate a location or DBA for an account that is still operating at another location
- 4 Make miscellaneous changes to account information that do not involve a change in ownership
- 5 Request an adjustment to your account based upon updated or corrected payroll or registration information

DO NOT USE THIS FORM if you are no longer conducting business in San Francisco or if there has been a change in ownership or ownership type. You must use the form "Declaration of Closed Business or Change in Ownership" available at City Hall in Room 140, online at www.sftreasurer.org/businessforms, or by calling Taxpayer Assistance at (415) 554-4400.

Business Registration Certificate Number: 474129

Registered Ownership Name: San Francisco Foundation ^{on Gov} Council

DBA (Doing Business As) Name: SFFDCG

OFFICE USE ONLY:

Staff Initials: Ly

Date Processed: 5/13/2013

1 UPDATE AN ADDRESS

Important: Please note that the Tax Collector maintains three separate types of business addresses:

- A. Business Mailing Address Location: Notices and other materials from the Tax Collector are sent to this address.
- B. Business Location: This is the physical address of the business (including home-based businesses).
- C. Accounting Records Location: Accounting records are kept at this address.

(Please note that a post office box can be used as the mailing address for the business, but cannot be used as the actual business location.)

A. Business Mailing Address

Effective Date – date that the address change took (or will take) place: (mm/dd/yyyy) _____

Name of mail recipient: _____ Phone: () _____

New Address Suite # City & State Zip

B. Business Location

Check here if same as Business Mailing Address; otherwise enter address below

Effective Date – date that the address change took (or will take) place: (mm/dd/yyyy) _____

New Address (Cannot be a P.O. Box) Suite # City & State Zip

C. Accounting Records Location

Check here if same as Business Mailing Address; otherwise enter address below

Name of mail recipient: _____ Phone: () _____

New Address (Cannot be a P.O. Box) Suite # City & State Zip

THIS FORM MUST BE SIGNED AND DATED ON THE REVERSE SIDE
(If this form is not signed by an authorized representative of the business, it will be returned without processing)

Revised 10/18/12

CA 12182015 06/01/15 302 0001



**CITY AND COUNTY OF SAN FRANCISCO
OFFICE OF THE TREASURER & TAX COLLECTOR**

Certificate Number: _____

UPDATES TO BUSINESS ACCOUNT INFORMATION - continued

ADD A NEW LOCATION OR FICTITIOUS BUSINESS NAME*

(* Fictitious Business Names used in San Francisco must be filed with the San Francisco County Clerk, located in Room 168 in City Hall.)

Effective Date -- starting date for new address and/or fictitious business name ("dba"): _____

Fictitious Business Name ("dba"), if applicable: _____

Location: _____

Street Address (Cannot be a P.O. Box)

Suite #

City & State

Zip

FOR OFFICE USE ONLY

Description of Primary Business Activity
(e.g., consulting services, retail shops, wholesale food)

Estimated SF Payroll
(12 months)

Estimated Number
of SF Employees

Class

PSC

NAICS

INACTIVATE A LOCATION OR FICTITIOUS BUSINESS NAME* (but still doing business in SF)

(* Fictitious Business Names can be abandoned with the County Clerk: City Hall, Room 168 -- (415) 554-4950; www.sfgov.org/CountyClerk)

I am still conducting business in San Francisco, but I have closed the specific LOCATION listed below:

LOCATION now closed: _____

Effective Date -- ending date for inactivated location: _____

I am still conducting business in San Francisco, but no longer use the FICTITIOUS BUSINESS NAME (dba) listed below:

FICTITIOUS BUSINESS NAME (dba) no longer using: _____

Effective Date -- ending date for Fictitious Business Name (dba): _____

OTHER CHANGES TO ACCOUNT INFORMATION (that do not involve a change in ownership):

Revise EIN ~~XXXXXXXXXX~~ effective 5/1/2013

REQUEST FOR FINANCIAL ADJUSTMENT TO ACCOUNT

Describe nature of adjustment and justification -- attach additional sheet and/or documentation as needed.

FOR OFFICE USE ONLY:

Approved by: _____

Processed by: _____

Date processed: _____

I understand that this declaration is subject to review by the Office of the Treasurer & Tax Collector. I declare under penalty of perjury that I am an authorized representative of this business entity and that the information contained herein is true and complete to the best of my knowledge and belief. I understand that misrepresentation of information is subject to a penalty of up to \$500 (San Francisco Business and Tax Regulations code, Section 6.17-3), and other penalties legally available.

NAME:

[Signature]
Signature

Wynett Lin President
Print Full Name and Title

DATE:

5/13/13

TELEPHONE:

[Redacted]

**CITY AND COUNTY OF SAN FRANCISCO
OFFICE OF THE TREASURER & TAX COLLECTOR**

City Hall, Room 140
1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102
Dial 3-1-1 within San Francisco;
(415) 701-2311 outside San Francisco
FAX: 554-8207
www.sftreasurer.org



Certificate Number: 47429

JOSÉ CISNEROS, TREASURER

UPDATES TO BUSINESS ACCOUNT INFORMATION

This form can be used for the following:

- Update an address (including mailing address, business location and/or accounting record location)
- Add a new location and/or fictitious business name ("dba") to an existing account
- Inactivate a location or DBA for an account that is still operating at another location
- Make miscellaneous changes to account information that do not involve a change in ownership
- Request an adjustment to your account based upon updated or corrected payroll or registration information

DO NOT USE THIS FORM if you are no longer conducting business in San Francisco or if there has been a change in ownership or ownership type. You must use the form "Declaration of Closed Business or Change in Ownership" available at City Hall in Room 140, online at www.sftreasurer.org/businessforms, or by calling Taxpayer Assistance at (415) 554-4400.

Business Registration Certificate Number: 47429

Registered Ownership Name: San Francisco Foundation ^{on term} Green

DBA (Doing Business As) Name: _____

FOR OFFICE USE ONLY:

Staff Initials: [Signature]

Date Processed: 4/5/13

UPDATE AN ADDRESS

Important: Please note that the Tax Collector maintains three separate types of business addresses:

- A. **Business Mailing Address Location:** Notices and other materials from the Tax Collector are sent to this address.
- B. **Business Location:** This is the physical address of the business (including home-based businesses).
- C. **Accounting Records Location:** Accounting records are kept at this address.

(Please note that a post office box can be used as the mailing address for the business, but cannot be used as the actual business location.)

A. Business Mailing Address

Effective Date – date that the address change took (or will take) place: (mm/dd/yyyy) _____

Name of mail recipient: _____ Phone: () _____

New Address Suite # City & State Zip

B. Business Location

Check here if same as Business Mailing Address; otherwise enter address below

Effective Date – date that the address change took (or will take) place: (mm/dd/yyyy) _____

New Address (Cannot be a P.O. Box) Suite # City & State Zip

C. Accounting Records Location

Check here if same as Business Mailing Address; otherwise enter address below

Name of mail recipient: _____ Phone: () _____

New Address (Cannot be a P.O. Box) Suite # City & State Zip

➔ **THIS FORM MUST BE SIGNED AND DATED ON THE REVERSE SIDE** ➔
(If this form is not signed by an authorized representative of the business, it will be returned without processing)

SF 1218001X 02/2013 001 6002



**CITY AND COUNTY OF SAN FRANCISCO
OFFICE OF THE TREASURER & TAX COLLECTOR**

Certificate Number: _____

UPDATES TO BUSINESS ACCOUNT INFORMATION - continued

1. ADD A NEW LOCATION OR FICTITIOUS BUSINESS NAME*

(* Fictitious Business Names used in San Francisco must be filed with the San Francisco County Clerk, located in Room 168 in City Hall.)

Effective Date - starting date for new address and/or fictitious business name ("dba"): 4/5/2013

Fictitious Business Name ("dba"), if applicable: SFF OTC

Location: 211 12th Street SF, CA 94103

Street Address (Cannot be a P.O. Box) Retail Herbal Medicine 0 0
 Description of Primary Business Activity Estimated SF Payroll (12 months) Estimated Number of SF Employees

City & State SF, CA Zip 94103
FOR OFFICE USE ONLY
 Class PBC NAICS

2. INACTIVATE A LOCATION OR FICTITIOUS BUSINESS NAME* (but still doing business in SF)

(* Fictitious Business Names can be abandoned with the County Clerk: City Hall, Room 168 - (415) 554-4950; www.sfgov.org/CountyClerk)

I am still conducting business in San Francisco, but I have closed the specific LOCATION listed below:

LOCATION now closed: _____

Effective Date - ending date for inactivated location: _____

I am still conducting business in San Francisco, but no longer use the FICTITIOUS BUSINESS NAME (dba) listed below:

FICTITIOUS BUSINESS NAME (dba) no longer using: _____

Effective Date - ending date for Fictitious Business Name (dba): _____

3. OTHER CHANGES TO ACCOUNT INFORMATION (that do not involve a change in ownership):

4. REQUEST FOR FINANCIAL ADJUSTMENT TO ACCOUNT

Describe nature of adjustment and justification - attach additional sheet and/or documentation as needed.

FOR OFFICE USE ONLY:
 Approved by: _____
 Processed by: _____
 Date processed: _____

I understand that this declaration is subject to review by the Office of the Treasurer & Tax Collector. I declare under penalty of perjury that I am an authorized representative of this business entity and that the information contained herein is true and complete to the best of my knowledge and belief. I understand that misrepresentation of information is subject to a penalty of up to \$500 (San Francisco Business and Tax Regulations code, Section 6.17-3), and other penalties legally available.

NAME: [Signature]
 Signature

Wyatt Lin
 Print Full Name and Title

DATE: 4/5/13

TELEPHONE: [Redacted]

**CITY AND COUNTY OF SAN FRANCISCO
OFFICE OF THE TREASURER & TAX COLLECTOR**

City Hall, Room 140
1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102
(415) 554-4400; FAX: 554-6207
www.sftreasurer.org



Certificate Number: 474129

**JOSÉ CISNEROS, TREASURER
GEORGE PUTRIS, TAX ADMINISTRATOR**

UPDATES TO BUSINESS ACCOUNT INFORMATION

This form can be used for the following:

- 1 Update an address (including mailing address, business location and/or accounting record location)
- 2 Add a new location and/or fictitious business name ("dba") to an existing account
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- 4 Make miscellaneous changes to account information that do not involve a change in ownership
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Business Registration Certificate Number: 474129
Registered Ownership Name: SE Foundation on Going Green
DBA (Doing Business As) Name: _____

474129
jr 1/10/13

1 UPDATE AN ADDRESS

Important: Please note that the Tax Collector maintains three separate types of business addresses:

- A. **Business Mailing Address Location:** Notices and other materials from the Tax Collector are sent to this address.
- B. **Business Location:** This is the physical address of the business (including home-based businesses).
- C. **Accounting Records Location:** Accounting records are kept at this address.

(Please note that a post office box can be used as the mailing address for the business, but cannot be used as the actual business location.)

A. Business Mailing Address

Effective Date - date that the address change took (or will take) place: (mm/dd/yyyy) 1/10/13
Name of mail recipient: SE Foundation on Going Green Phone: (_____) _____
211 12th Street SF, CA 94103
New Address Suite # City & State Zip

B. Business Location

Check here if same as Business Mailing Address; otherwise enter address below.

Effective Date - date that the address change took (or will take) place: (mm/dd/yyyy) 1/10/13
211 12th Street SF, CA 94103
New Address (Cannot be a P.O. Box) Suite # City & State Zip

C. Accounting Records Location

Check here if same as Business Mailing Address; otherwise enter address below

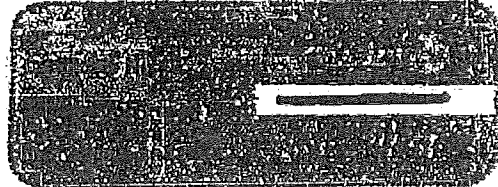
Name of mail recipient: _____ Phone: () _____
New Address (Cannot be a P.O. Box) Suite # City & State Zip

THIS FORM MUST BE SIGNED AND DATED ON THE REVERSE SIDE
(If this form is not signed by an authorized representative of the business, it will be returned without processing)

CASSI TOR VIZCARRA WINTERZ 2010

CITY AND COUNTY OF SAN FRANCISCO - OFFICE OF THE TREASURER & TAX COLLECTOR

JOSÉ GEMERO, TREASURER
 GEORGE PUTRE, TAX ADMINISTRATOR
 Business Tax & Taxpayer Assistance, City Hall - Room 140
 41 Dr. Carlton B. Goodlett Place, San Francisco, CA 94102
 TEL: (415) 654-4000; FAX: (415) 654-8007
 TTY: (415) 654-4956 (service for the deaf/hearing impaired)
 www.sfgov.org/tax



RECEIVED

APR 21 2009

APPLICATION
 BUSINESS REGISTRATION CERTIFICATE
 PARTNERSHIPS, CORPORATIONS and LIMITED LIABILITY ENTITIES

Please type or print legibly. **General** **Limited** **Limited Liability** **not for pro**
BUSINESS STRUCTURE: Partnership Partnership (LLP) Corporation Entity (LLC, LLP) **OTHER** (Describe below)

OWNERSHIP NAME: MED THRIVE

Partners' Names (Last, First) or Corporate Name or Organization Name (Will be entered as 1st character or last) 4-20-09

Federal Employer Identification Number (EIN) 3108004 State Corporate/Organization Number (if applicable) 715399 Start Date in S.F. (required)

BUSINESS MAILING ADDRESS:

Brenberg Misha owner
 Last Name First Name Middle Initial Title/Position (optional, if needed)

1433 Mission St ()
 Street Address (Postal boxes are acceptable for mailing address) Area Code Telephone

San Francisco CA 94103 USA
 City State ZIP Code Country (for foreign addresses only)

ACCOUNTING RECORD LOCATION: Check here if same as Business Mailing Address; otherwise enter address below.

Bornstein Daniel M owner
 Last Name First Name Middle Initial Title/Position

507 Park Street Ste. 320 ()
 Street Address Area Code Telephone

San Francisco CA 94102 USA
 City State ZIP Code Country (for foreign addresses only)

BUSINESS LOCATION (PO Box not acceptable): Check here if same as Business Mailing Address; otherwise enter address below.

1433 Mission San Francisco CA 94103
 Street No. Street Name City State ZIP Code

RESIDENTIAL AND COMMERCIAL LEASES ONLY: Total # of Residential Units: _____ Total # of Commercial Units: _____

BUSINESS NAME (DBA): MED THRIVE
 (Note: Only 30 characters will appear on your Business Registration Certificate)

BUSINESS DESCRIPTION:

Medicinal Cannabis Dispensary _____
 Description of Primary Business Activity Est. Payroll (12 mos.) Est. # of Employees

 Description of Primary Business Activity Est. Payroll (12 mos.) Est. # of Employees

FOR OFFICE USE ONLY

07 7389
 Business Class FBC

 Business Class FBC

APPLICATION CONTINUES ON THE REVERSE SIDE

Revised 06/2008

OWNERSHIP DETAIL: List all general and/or limited partners, officers, members, or other entities that make up the ownership of the business. If there are more than three ownership entities, please attach an additional sheet (or sheets) as needed.

Last Name (if an individual) or Entity Name (if an organization) <u>Brykhard</u>		First Name (if an individual) <u>Misha</u>		Middle Initial <u></u>
Residence Address (if an individual) or Entity Address (if an organization) <u>1933 Mission St.</u>		City, State <u>SE CA</u>		ZIP Code <u>94103</u>
Social Security Number of partner, officer, or member <u></u>		Area Code <u></u>	Telephone <u></u>	
IF GENERAL PARTNERSHIP, LLC, LLP, OR JOINT VENTURE: Percentage of Ownership = <u> </u> %	IF CORPORATION: <input checked="" type="checkbox"/> Corporate Officer <input type="checkbox"/> Major Stockholder <input type="checkbox"/> Both		IF LP: <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner Percentage of Ownership = <u> </u> %	

Last Name (if an individual) or Entity Name (if an organization) <u>Bornstein</u>		First Name (if an individual) <u>Daniel</u>		Middle Initial <u></u>
Residence Address (if an individual) or Entity Address (if an organization) <u>1933 Mission</u>		City, State <u>SE CA</u>		ZIP Code <u>94103</u>
Social Security Number of partner, officer, or member <u></u>		Area Code <u></u>	Telephone <u></u>	
IF GENERAL PARTNERSHIP, LLC, LLP, OR JOINT VENTURE: Percentage of Ownership = <u> </u> %	IF CORPORATION: <input checked="" type="checkbox"/> Corporate Officer <input type="checkbox"/> Major Stockholder <input type="checkbox"/> Both		IF LP: <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner Percentage of Ownership = <u> </u> %	

Last Name (if an individual) or Entity Name (if an organization)		First Name (if an individual)		Middle Initial
Residence Address (if an individual) or Entity Address (if an organization)		City, State		ZIP Code
Social Security Number of partner, officer, or member		Area Code	Telephone	
IF GENERAL PARTNERSHIP, LLC, LLP, OR JOINT VENTURE: Percentage of Ownership = <u> </u> %	IF CORPORATION: <input type="checkbox"/> Corporate Officer <input type="checkbox"/> Major Stockholder <input type="checkbox"/> Both		IF LP: <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner Percentage of Ownership = <u> </u> %	

I declare under penalty of perjury, under the laws of the State of California, that I have examined this application and that the information contained herein is true and complete to the best of my knowledge and belief. I understand that misrepresentation of information is subject to a penalty of up to \$250. (San Francisco Business and Tax Regulations Code, Section 6.17-3).

AUTHORIZED REPRESENTATIVE: Stephanie Tucker Stephanie Tucker
Signature Print Full Name (and title, if necessary to clarify authentication)

DATE: 4-21-09 TELEPHONE:
Area Code Telephone



**CITY AND COUNTY OF SAN FRANCISCO
OFFICE OF THE TREASURER & TAX COLLECTOR**

Certificate Number: _____

UPDATES TO BUSINESS ACCOUNT INFORMATION - continued

1. ADD A NEW LOCATION OR FICTITIOUS BUSINESS NAME*
(* Fictitious Business Names used in San Francisco must be filed with the San Francisco County Clerk, located in Room 168 in City Hall)
 Effective Date - starting date for new address and/or fictitious business name ("dba"): 5/21/2011
 Fictitious Business Name ("dba"), if applicable: MDVE SF INC
 Location: 1933 Mission St 20 San Francisco CA 94133
Street Address (Cannot be a P.O. Box) Suite # City & State ZIP
 Description of Primary Business Activity: Design Estimated SF Payroll Estimated Number of SF Employees: 20
(e.g., consulting services, retail store, wholesale food) (12 months)
 Class: PBO NAICS: _____
FOR OFFICE USE ONLY

2. INACTIVATE A LOCATION OR FICTITIOUS BUSINESS NAME* (but still doing business in SF)
(* Fictitious Business Names can be abandoned with the County Clerk, City Hall, Room 168 - (415) 534-2330, www.sfgov.org/CountyClerk)
 I am still conducting business in San Francisco, but I have closed the specific LOCATION listed below:
 LOCATION now closed: _____
 Effective Date - ending date for inactivated location: _____
 I am still conducting business in San Francisco, but no longer use the FICTITIOUS BUSINESS NAME (dba) listed below:
 FICTITIOUS BUSINESS NAME (dba) no longer using: _____
 Effective Date - ending date for Fictitious Business Name (dba): _____

3. OTHER CHANGES TO ACCOUNT INFORMATION (that do not involve a change in ownership)

4. REQUEST FOR FINANCIAL ADJUSTMENT TO ACCOUNT
 Describe nature of adjustment and justification - attach additional sheet and/or documentation as needed.

FOR OFFICE USE ONLY
 Approved by: _____
 Processed by: _____
 Date processed: _____

I understand that this declaration is subject to review by the Office of the Treasurer & Tax Collector. I declare under penalty of perjury that I am an authorized representative of this business entity and that the information contained herein is true and complete to the best of my knowledge and belief. I understand that misrepresentation of information is subject to a penalty of up to \$500 (San Francisco Business and Tax Regulations code, Section 6.17-3), and other penalties legally available.

NAME: David Borstein
Signature
 DATE: 6/23/2011 TELEPHONE: _____
Print Full Name and Title

**CITY AND COUNTY OF SAN FRANCISCO
OFFICE OF THE TREASURER & TAX COLLECTOR**

City Hall, Room 140
1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102
(415) 554-4400; TTY: 554-4455; FAX: 554-8207
www.sfgov.org/tax



Certificate Number: 438266

JOSÉ CISNEROS, TREASURER
GEORGE PUTRIS, TAX ADMINISTRATOR

UPDATES TO BUSINESS ACCOUNT INFORMATION

This form can be used for the following:

- Update an address (including mailing address, business location and/or accounting record location)
- Add a new location and/or fictitious business name ("dba") to an existing account
- Inactivate a location or DBA for an account that is still operating at another location
- Make miscellaneous changes to account information that do not involve a change in ownership

DO NOT USE THIS FORM if you are *no longer conducting business in San Francisco* or there has been a change in ownership or ownership type. You must use the form "Declaration of Closed Business or Change in Ownership" available at City Hall in Room 140, or call (415) 554-4400, or online at www.sfgov.org/tax/businessforms.

Business Registration Certificate Number: 438266

Registered Ownership Name: Med Thrive Cooperative Inc.

DBA (Doing Business As) Name: Medthrive

FOR OFFICE USE ONLY
Staff Initials: SAB
Date Processed: 6-22-09

1 UPDATE AN ADDRESS

Important: Please note that the Tax Collector maintains three separate types of business addresses:
A. Business Mailing Address Location: Notices and other materials from the Tax Collector are sent to this address.
B. Business Location: This is the physical address of the business (including home-based businesses).
C. Accounting Records Location: Accounting records are kept at this location.
(Please note that a post office box can be used as the mailing address for the business, but cannot be used as the actual business location.)

A. Business Mailing Address

Effective Date - date that the address change took (or will take) place: (mm/dd/yyyy) _____

Name of mail recipient: _____ Phone: () _____

New Address Suite # City & State Zip

B. Business Location Check here if same as Business Mailing Address; otherwise enter address below

Effective Date - date that the address change took (or will take) place: (mm/dd/yyyy) _____

New Address (Cannot be a P.O. Box) Suite # City & State Zip

C. Accounting Records Location Check here if same as Business Mailing Address; otherwise enter address below

Name of mail recipient: _____ Phone: () _____

New Address (Cannot be a P.O. Box) Suite # City & State Zip

THIS FORM MUST BE SIGNED AND DATED ON THE REVERSE SIDE
(If this form is not signed by an authorized representative of the business, it will be returned without processing)

CITY AND COUNTY OF SAN FRANCISCO
OFFICE OF THE TREASURER & TAX COLLECTOR



UPDATES TO BUSINESS ACCOUNT INFORMATION - continued

ADD A NEW LOCATION OR FICTITIOUS BUSINESS NAME*

(* Fictitious Business Names used in San Francisco must be filed with the San Francisco County Clerk, located in Room 168 in City Hall.)

Effective Date - starting date for new address and/or fictitious business name ("dba"): 08/01/2009
mm/dd/yyyy

Fictitious Business Name ("dba"), if applicable: MedThrive

Location: 1933 Mission Street San Francisco, CA 94103
Street Address (Cannot be a P.O. Box) Suite # City & State Zip

Medical Marijuana Dispensary
Description of Primary Business Activity Estimated SF Payroll (12 months) Estimated Number of SF Employees

FOR OFFICE USE ONLY
Class FIC NAICS

For apartment building owner: Number of apartment units: NA Number of Commercial Units NA

INACTIVATE A LOCATION OR FICTITIOUS BUSINESS NAME* (but still doing business in SF)

(* Fictitious Business Names can be abandoned with the County Clerk: City Hall, Room 168 - (415) 554-4950; www.sfgov.org/CountyClerk)

I am still conducting business in San Francisco, but I have closed the specific LOCATION listed below:

LOCATION now closed: _____

Effective Date - ending date for inactivated location: _____
mm/dd/yyyy

I am still conducting business in San Francisco, but no longer use the FICTITIOUS BUSINESS NAME (dba) listed below:

FICTITIOUS BUSINESS NAME (dba) no longer using: _____

Effective Date - ending date for Fictitious Business Name (dba): _____
mm/dd/yyyy

OTHER CHANGES TO ACCOUNT INFORMATION (that do not involve a change in ownership):

The actual ~~Corp~~ Corporate name should be Med Thrive Cooperative inc

I understand that this declaration is subject to review by the Office of the Treasurer & Tax Collector. I declare under penalty of perjury that I am an authorized representative of this business entity and that the information contained herein is true and complete to the best of my knowledge and belief. I understand that misrepresentation of information is subject to a penalty of up to \$500 (San Francisco Business and Tax Regulations code, Section 6.17-3), and other penalties legally available.

NAME: [Signature] Daniel Bornstein (Board Member)
Signature Print Full Name (and Title, if applicable)

DATE: 6/22/09 TELEPHONE: _____

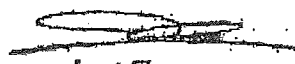
License Certificate

FY 2016-2017

City & County of San Francisco Office of the Treasurer & Tax Collector		License Certificate 1 Dr. Carlton B. Goodlett Place City Hall, Room 160 San Francisco, CA 94102
Business Account Number 474129	Period Covered 04/01/2016 - 03/31/2017	Fee Paid [REDACTED]
Class Account H72-500004	Description MED CANNABIS DISP	
Business Name SF FOUNDATION ON GOING GREEN	Business Location 211 12TH ST	Permit Number 071461

16-BIT # 488

SF FOUNDATION ON GOING GREEN
 211 12TH ST
 SAN FRANCISCO CA 94103-3717


José Cisneros
 Treasurer

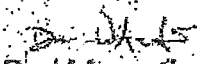
See reverse side for additional information
 Please post conspicuously at the business location

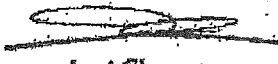
FY 2015-2016

City & County of San Francisco Office of the Treasurer & Tax Collector		License Certificate 1 Dr. Carlton B. Goodlett Place City Hall, Room 160 San Francisco, CA 94102
Business Account Number 0474129	Period Covered 04/01/2015 - 03/31/2016	Fee Paid [REDACTED]
Class Account H72-500004	Description MED CANNABIS DISP	
Business Name SF FOUNDATION ON GOING GREEN	Business Location 211 12TH ST	Permit Number 071461

15-007361

SF FOUNDATION ON GOING GREEN
 211 12TH ST
 SAN FRANCISCO CA 94103-3717


David Augustine
 Tax Collector


José Cisneros
 Treasurer

See reverse side for additional information
 Please post conspicuously at the business location

Cancelled Check (payment of Bill 15-006116)

AT THE BANK OF AMERICA

3270

PAY TO THE ORDER OF SF Tax collector DATE 4/7/15 #07116-2211

DOLLARS

Citibank
 CITIBANK N.A. MEMBER FDIC
 100 BROADWAY, NEW YORK, NY 10048

FOR W. J. [Signature]

#003270*

15081

15082

Cancelled Check (payment of Bill 14-006458)

AT THE BANK OF AMERICA

15081

15082

Customer Service Information: PO BOX 270117 San Antonio, TX 78227-0117 1-800-374-8783	ACCOUNT #0011881-0A	HOUSEHOLD ID. 0707616158	REFERENCE NO. 0016317	CONTROL NO. 00000000	DATE 03/27/2014	CHECK NO. 07462602
--	------------------------	-----------------------------	--------------------------	-------------------------	--------------------	-----------------------

CUSTOMER ACCOUNT NUMBER /NOTE: 14-006458 BILL NUMBER 14-006458 62-80 511

15081

15082

PAY TO THE ORDER OF SF TAX COLLECTOR

AMOUNT

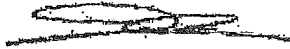
CITIBANK N.A.
 ONE LIBERTY SQUARE, NEW YORK, NY 10048

OFFICIAL CHECK DRAWER: CITIBANK N.A.
 AUTHORIZED SIGNATURE

#074582842*

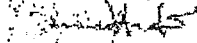

License Certificate

FY 2016-2017

City & County of San Francisco Office of the Treasurer & Tax Collector		License Certificate		1 Dr. Carlton B. Goodlett Place City Hall, Room 140 San Francisco, CA 94102
18-012848	Business Account Number 438266	Period Covered 04/01/2016 - 03/31/2017	Fee Type _____	
	Class Account 172 - 000022	Description MED CANNABIS DISP	_____	
	Business Name MEDTHRIVE	Business Location 1933 MISSION ST	Permit Number 012822	
MED THRIVE COOPERATIVE INC 1933 MISSION ST SAN FRANCISCO CA 94103-3441			 José Cisneros Treasurer	

See reverse side for additional information
Please print accurately at the business location

FY 2015-2016

City & County of San Francisco Office of the Treasurer & Tax Collector		License Certificate		1 Dr. Carlton B. Goodlett Place City Hall, Room 140 San Francisco, CA 94102
18-012848	Business Account Number 0438266	Period Covered 04/01/2015 - 03/31/2016	Fee Type _____	
	Class Account 172 - 000022	Description MED CANNABIS DISP	_____	
	Business Name MEDTHRIVE	Business Location 1933 MISSION ST	Permit Number 012822	
MED THRIVE COOPERATIVE INC 1933 MISSION ST SAN FRANCISCO CA 94103-3441			 David Augustine Tax Collector	
 José Cisneros Treasurer				

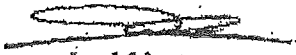
See reverse side for additional information
Please print accurately at the business location

License Statement Summary (Payment Record)

BUSINESS LICENSE SYSTEM		04-03-2017	
STATEMENT SUMMARY			
PLATE	STATUS	TOTAL DUE	TOTAL PAID
438256			** CERTIFICATE HELD **
12-302964	ACTIVE 01-01-2012		
11-302705	ACTIVE 01-01-2011		
10-302547	ACTIVE 01-01-2010		
09-301905	ACTIVE 01-01-2009		

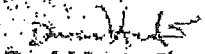
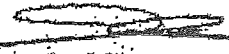
License Certificate

FY 2016-2017

City & County of San Francisco Office of the Treasurer & Tax Collector		License Certificate		1 Dr. Carlton B. Goodlett Place City Hall, Room 140 San Francisco, CA 94102
15-000215	Business Account Number 446547	Period Covered 04/01/2016 - 03/31/2017	Fee Paid \$0.00	
	Class Account F72 - 000028	Description MED CANNABIS DISP		
	Business Name SHAMBALA HEALING CENTER INC	Business Location 2441 MISSION ST	Permit Number 012887	
SHAMBALA HEALING CENTER INC 2441 MISSION STREET SAN FRANCISCO CA 94110-2414			 José Cisneros Treasurer	

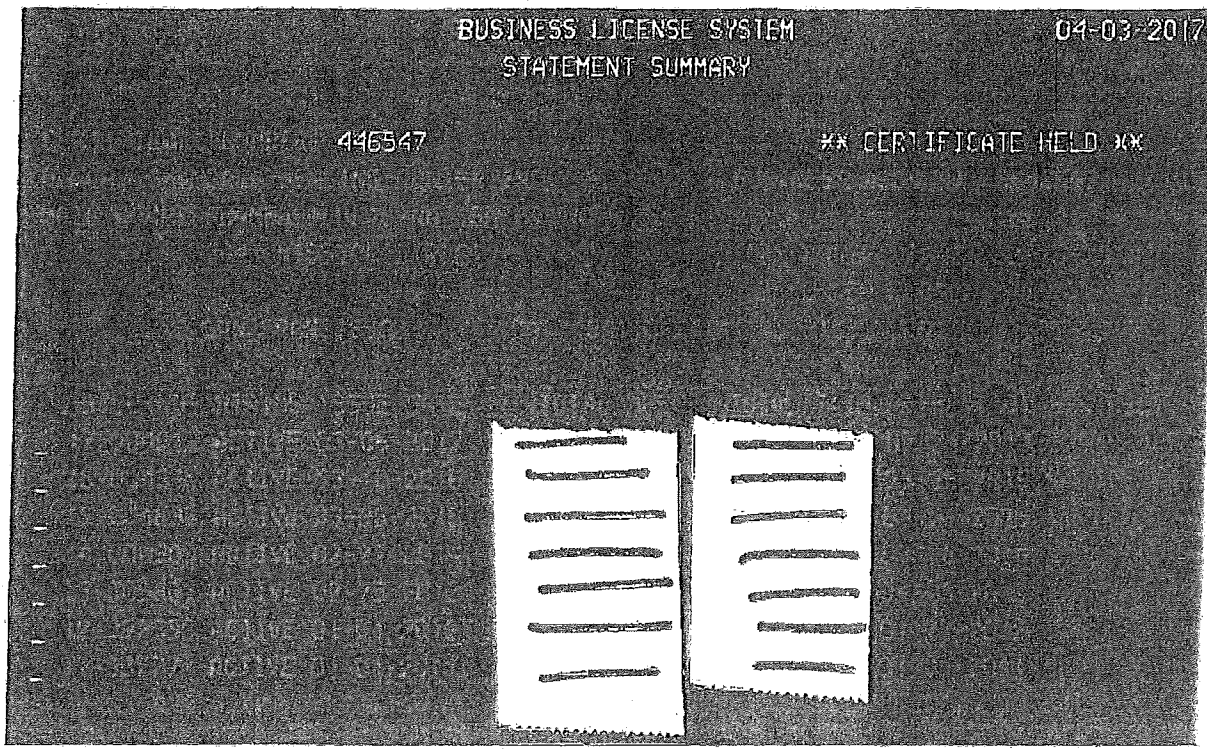
Use reverse side for additional information
 Please post conspicuously at the business location

FY 2015-2016

City & County of San Francisco Office of the Treasurer & Tax Collector		License Certificate		1 Dr. Carlton B. Goodlett Place City Hall, Room 140 San Francisco, CA 94102
15-000180	Business Account Number 0446547	Period Covered 04/01/2015 - 03/31/2016	Fee Paid \$0.00	
	Class Account F72 - 000028	Description MED CANNABIS DISP		
	Business Name SHAMBALA HEALING CENTER INC	Business Location 2441 MISSION ST	Permit Number 012887	
SHAMBALA HEALING CENTER INC 2441 MISSION STREET SAN FRANCISCO CA 94110-2414			 David Augustine Tax Collector	
 José Cisneros Treasurer				

Use reverse side for additional information
 Please post conspicuously at the business location

License Statement Summary (Payment Record)



Cancelled Check (payment of Bill 17-004017)

Payable Check presented on 05/21/17 to San Francisco Tax Collector

10310217 80645 16 85

004118

05/21/17

PAY TO THE ORDER OF San Francisco Tax Collector

FOR BUSINESS ACCT # 0446547

004118

Cancelled Check (payment of Bill 16-004315)

Payable Check presented on 05/25/16 to San Francisco Tax Collector

009000

05/25/16

PAY TO THE ORDER OF San Francisco Tax Collector

FOR BUSINESS ACCT # 0446547 Bill # 16-004315

009000

Cancelled Check (payment of 15-004636)

Business Account # 0446547

002605

4/20/15

PAY TO THE ORDER OF San Francisco Tax Collector

FOR BUSINESS ACCT # 0446547

002605

P481

BUSINESS LICENSE SYSTEM
STATEMENT SUMMARY

04-04-2017

CERTIFICATE NUMBER: 438266
OWNER: MED THRIVE COOPERATIVE INC
MAIL ADDR: MED THRIVE COOPERATIVE INC
1933 MISSION ST

** CERTIFICATE HELD **
BUSINESS ACCOUNT: 0438266

SAN FRANCISCO

CA 94103-3441

OWNER START: 04-21-2009
OWNER CLOSE:
.BTS EXTRACT: 04-04-2017

BILL NO	STATUS	ISSUE DATE	TOTAL DUE	TOTAL PAID	PAYMENT DT	NEW BILL
17-003714	ACTIVE	03-06-2017	_____			
16-003985	ACTIVE	03-10-2016	_____		05-02-2016	
15-004283	ACTIVE	03-03-2015	_____		05-08-2015	
14-004523	ACTIVE	02-27-2014	_____		05-30-2014	
13-004977	ACTIVE	02-25-2013	_____		07-31-2013	
12-302984	ACTIVE	01-01-2012	_____		02-24-2012	
11-302765	ACTIVE	01-01-2011	_____		01-25-2011	
10-302547	ACTIVE	01-01-2010	_____		05-07-2010	
09-301905	ACTIVE	01-01-2009	_____		11-02-2009	

DUE THROUGH 04 - 2017

LIC-815: RECORD INQUIRY COMPLETE.

BUSINESS LICENSE SYSTEM
STATEMENT DETAIL

04-04-2017

CERTIFICATE NUMBER: 438266 BILL NO: 17-003714 ISSUE DT: 03-06-2017
OWNER: MED THRIVE COOPERATIVE INC TOTAL DUE:) COLL CST:
TOTAL DUE THRU 04 - 2017 TOTAL PAID: PAYMT DT:

02001 MEDITHRIVE 1933 MISSION ST
CLS ACCT EXP DT. FEE DUE PEN DUE OTHER DUE TOTAL DUE PEN DT. PERMIT
H72 000022 03-2017 ----- ----- ----- ----- 05-2017 012822

TOTAL ----- ----- ----- -----

NO MORE PAGES, PF7 BACK

BUSINESS LICENSE SYSTEM
STATEMENT SUMMARY

04-04-2017

CERTIFICATE NUMBER: 474129
OWNER: SF FOUNDATION ON GOING GREEN
MAIL ADDR: SF FOUNDATION ON GOING GREEN
211 12TH ST

BUSINESS ACCOUNT: 0474129

OWNER START: 12-01-2012

OWNER CLOSE:

BTS EXTRACT: 04-04-2017

SAN FRANCISCO

CA 94103-3717

BILL NO	STATUS	ISSUE DATE	TOTAL DUE	TOTAL PAID	PAYMENT DT	NEW BILL
17-005279	ACTIVE	03-06-2017	_____	_____		
16-005682	ACTIVE	03-10-2016	_____	_____	04-27-2016	
15-006116	ACTIVE	03-03-2015	_____	_____	04-08-2015	
14-006458	ACTIVE	02-27-2014	_____	_____	03-11-2014	
13-011639	ACTIVE	07-01-2013	_____	_____	07-10-2013	

TOTAL DUE THROUGH 04 - 2017

LIC-815: RECORD INQUIRY COMPLETED

BUSINESS LICENSE SYSTEM
STATEMENT DETAIL

04-04-2017

CERTIFICATE NUMBER: 474129 BILL NO: 17-005279 ISSUE DT: 03-06-2017
OWNER: SF FOUNDATION ON GOING GREE TOTAL DUE: COLL CST: ~~528.00~~
TOTAL DUE THRU 04 - 2017 TOTAL PAID: PAYMT DT:

02001 SF FOUNDATION ON GOING GREEN 211 12TH ST
CLS ACCT EXP DT. FEE DUE PEN DUE OTHER DUE TOTAL DUE PEN DT. PERMIT
H72 500004 03-2018 05-2017 071461

TOTAL

NO MORE PAGES, PF7 BACK

BUSINESS LICENSE SYSTEM
STATEMENT SUMMARY

04-04-2017

CERTIFICATE NUMBER: 446547
OWNER: SHAMBALA HEALING CENTER INC
MAIL ADDR: SHAMBALA HEALING CENTER INC
2441 MISSION STREET

** CERTIFICATE HELD **
BUSINESS ACCOUNT: 0446547

SAN FRANCISCO

CA 94110-2414

OWNER START: 02-16-2010

OWNER CLOSE:

BTS EXTRACT: 04-04-2017

BILL NO	STATUS	ISSUE DATE	TOTAL DUE	TOTAL PAID	PAYMENT DT	NEW BILL
17-004017	ACTIVE	03-06-2017	██████████	██████████	03-24-2017	
16-004315	ACTIVE	03-10-2016	██████████	██████████	03-28-2016	
15-004636	ACTIVE	03-03-2015	██████████	██████████	04-21-2015	
14-004909	ACTIVE	02-27-2014	██████████	██████████	03-28-2014	
13-005401	ACTIVE	02-25-2013	██████████	██████████	04-29-2013	
12-302990	ACTIVE	01-01-2012	██████████	██████████	01-17-2012	
11-302771	ACTIVE	01-01-2011	██████████	██████████	01-31-2011	

TOTAL DUE THROUGH 04 - 2017

LIC-815: RECORD INQUIRY COMPLETED

BUSINESS LICENSE SYSTEM
STATEMENT DETAIL

04-04-2017

CERTIFICATE NUMBER: 446547 BILL NO: 17-004017 ISSUE DT: 03-06-2017
OWNER: SHAMBALA HEALING CENTER INC TOTAL DUE: } COLL CST: 0.00
TOTAL DUE THRU 04 - 2017 TOTAL PAID: } PAYMT DT: 03-24-2017

01001 SHAMBALA HEALING CENTER INC 2441 MISSION ST
CLS ACCT EXP DT. FEE DUE PEN DUE OTHER DUE TOTAL DUE PEN DT. PERMIT
H72 000028 03-2018 05-2017 012887

TOTAL

NO MORE PAGES, PF7 BACK

Lew, Debra (TTX)

From: Lew, Debra (TTX)
Sent: Monday, April 10, 2017 10:03 AM
To: 'Matthew Maclear'; Utley, Eric (TTX)
Subject: RE: Shambala, Medithrive and SFFOGG: Berlin PRA Response

San Francisco Business and Tax Regulations Code Article 6, Section 6.22-1 states that "...taxpayer's return is confidential...". Section 6.2-17 of the same Article states that "The term "return" means any written statement required to be filed pursuant to Articles 6, 7, 9, 10, 10B, 11, 12, 12-A or 12-A-1, or pursuant to laws applicable to a fee administered pursuant to Article 6,..."

Article 12-A is the Payroll Expense Tax Ordinance and as stated above, per the sec 6.2-17, any written statement filed pursuant to Article 12-A is a return and, per Sect 6.22-1, is deemed confidential. Confidential Information provided in these returns could be used to disadvantage the taxpayer, thus the City cannot break this confidentiality and relies on Cal Gov Code 6254(i) for authority.

Very truly yours,

Debra D. Lew
Assistant Tax Collector Attorney
Office of the Treasurer and Tax Collector -Legal Section
P.O. Box 7426
San Francisco, CA 94120-7426
Phone: (415) 554-7888
Fax: (415) 554-5010

From: Matthew Maclear [mailto:MCM@atalawgroup.com]
Sent: Friday, April 07, 2017 4:03 PM
To: Utley, Eric (TTX)
Cc: Lew, Debra (TTX)
Subject: RE: Shambala, Medithrive and SFFOGG: Berlin PRA Response

Thanks for the links. Please help me identify the section on which you are relying to claim a business application is a return.

From: Utley, Eric (TTX) [mailto:eric.utley@sfgov.org]
Sent: Friday, April 07, 2017 3:31 PM
To: Matthew Maclear <MCM@atalawgroup.com>
Cc: Lew, Debra (TTX) <debra.lew@sfgov.org>
Subject: RE: Shambala, Medithrive and SFFOGG: Berlin PRA Response

Good Afternoon Mr. Maclear,

This link should bring you directly to the correct section of the San Francisco Business and Tax Regulations Code, Article 6, Section 6.2-17.

[http://library.amlegal.com/nxt/gateway.dll/California/business/article6commonadministrativeprovisions?f=templates\\$fn=default.htm\\$3.0\\$vid=amlegal:sanfrancisco_ca\\$sanc=JD_6.2-17](http://library.amlegal.com/nxt/gateway.dll/California/business/article6commonadministrativeprovisions?f=templates$fn=default.htm$3.0$vid=amlegal:sanfrancisco_ca$sanc=JD_6.2-17)

RECEIVED
BOARD OF SUPERVISORS
SAN FRANCISCO
2017 APR 10 PM 4:18
BY *[Signature]*

EXHIBIT 2
P488

Here are also a 2 generic links to the whole code:

<https://www.sfcityattorney.org/good-government/municipal-code/>

http://www.amlegal.com/codes/client/san-francisco_ca/

Please let myself or Debra know if it doesn't work.

Thank You,
Eric Utley
Legal Assistant
Phone: (415) 554-4493

From: Lew, Debra (TTX)
Sent: Friday, April 07, 2017 3:16 PM
To: Utley, Eric (TTX)
Subject: FW: Shambala, Medithrive and SFFOGG: Berlin PRA Response

Hi Eric, Can you please get the SF Muni code site to Mr. Maclear please? Thanks.

Debra D. Lew
Assistant Tax Collector Attorney
Office of the Treasurer and Tax Collector -Legal Section
P.O. Box 7426
San Francisco, CA 94120-7426
Phone: (415) 554-7888
Fax: (415) 554-5010

From: Matthew Maclear [<mailto:MCM@atalawgroup.com>]
Sent: Friday, April 07, 2017 3:15 PM
To: Lew, Debra (TTX)
Subject: RE: Shambala, Medithrive and SFFOGG: Berlin PRA Response

Can you send the links again as they came up with server errors. Thanks.

From: Lew, Debra (TTX) [<mailto:debra.lew@sfgov.org>]
Sent: Friday, April 07, 2017 12:54 PM
To: Matthew Maclear <MCM@atalawgroup.com>
Subject: RE: Shambala, Medithrive and SFFOGG: Berlin PRA Response

Hi Matt, in our evening phone call of April 5, 2017, we discussed whether the number of employees was confidential and whether such information was part of a tax return, as that number was redacted in response to your PRAs of October 20, 2016, December 7, 2016 and March 23, 2017. You asked that we provide authority for this position. We refer you to the definition of a return as set forth in San Francisco Business and Tax code section 6.2-17 which states: The term "return" means any written statement required to be filed pursuant to Articles 6, 7, 9, 10, 10B, 11, 12, 12-A or 12-A-1, or pursuant to laws applicable to a fee administered pursuant to Article 6, or pursuant to laws applicable to an assessment levied pursuant to the Property and Business Improvement District Law of 1994 (California Streets and Highways Code sections 36600 *et seq.*) or Article 15 of this Code.

Also, can you let please let us know whether your client has agreed to withdraw its Complaint with the Sunshine Ordinance Task Force (without prejudice)? We are investigating what happened or could have happened. Neither of

the two letters were scanned and there is no record of receipt by Legal, Cashiering, or TPA, until your associate appeared in person with the October 20, 2016 letter with Attachment A, where we made a copy of same.

Also, although your client is not a competitor, Govt. Code 6254(i) applies to "other persons" and not just the competitor itself, where disclosure would result in unfair competitive disadvantage to the person supplying the information.

Please contact me with any questions or concerns.

Thanks.

Debra D. Lew
Assistant Tax Collector Attorney
Office of the Treasurer and Tax Collector -Legal Section
P.O. Box 7426
San Francisco, CA 94120-7426
Phone: (415) 554-7888
Fax: (415) 554-5010

From: Matthew Maclear [<mailto:MCM@atalawgroup.com>]
Sent: Wednesday, April 05, 2017 1:03 PM
To: Lew, Debra (TTX)
Subject: RE: Shambala, Medithrive and SFFOGG PRA Response

Debra:

Nice speaking with you.

CAPA is not a competitor of any entity for whom they are seeking information and CAPA is not in the marijuana dispensary business.

Thanks,
Matt

Matthew C. Maclear
Aqua Terra Aeris Law Group
415.568.5200
www.atalawgroup.com



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From: Lew, Debra (TTX) [<mailto:debra.lew@sfgov.org>]
Sent: Tuesday, April 04, 2017 5:12 PM
To: Matthew Maclear <MCM@atalawgroup.com>
Subject: Shambala, Medithrive and SFFOGG PRA Response

Dear Mr. Maclear: Please see the attached letter and documents. Please note that the City and County of San Francisco has no record of receiving your letter dated October 20 or December 7, 2016 by mail. We first became aware of the October 20, 2016 on about March 23, 2017. We are investigating what could have happened and apologize for the delay. What date were these letters sent?

The statement of compliance and documents we are producing herewith, are responsive to your office's multiple requests.

Please feel free to contact the undersigned to discuss this matter further.

Thank you.

Very truly yours,

Debra D. Lew
Acting Tax Collector Attorney
Office of the Treasurer and Tax Collector -Legal Section
P.O. Box 7426
San Francisco, CA 94120-7426
Phone: (415) 554-7888
Fax: (415) 554-5010

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Young, Victor

From: SOTF, (BOS)
Sent: Friday, April 07, 2017 4:03 PM
To: 'dratler@sonic.net'; Lediju, Tonia (CON); CON, Controller (CON); Rosenfield, Ben (CON); 'kjmmbm@gmail.com'; Quezada, Randolph (HOM); HSHSunshine; 'Josh Wolf'; BreedStaff, (BOS); Baumgartner, Margaret (CAT); Guzman, Andrea (CAT); 'Ann Treboux'; Cote, John (CAT); 'gb@atalawgroup.com'; Lew, Debra (TTX); 'Allen Grossman'; Eng, Michael (CPC); Ionin, Jonas (CPC); Silva, Christine (CPC)
Cc: Ng, Wilson (BOS); Calvillo, Angela (BOS)
Subject: SOTF - Notice of Hearing - Complaint Committee: April 25, 2017, 5:30 p.m.

Good Afternoon:

Notice is hereby given that the Complaint Committee (Committee) of the Sunshine Ordinance Task Force (Task Force) shall hold hearings on complaints listed below to: 1) determine if the Task Force has jurisdiction; 2) review the merits of the complaints; and/or 3) issue a report and/or recommendation to the Task Force.

Date: April 25, 2017

Location: City Hall, Room 408

Time: 5:30 p.m.

Complainants: Your attendance is required for this meeting/hearing.

Respondents/Departments: Pursuant to Section 67.21(e) of the Ordinance, the custodian of records or a representative of your department, who can speak to the matter, is required at the meeting/hearing.

Complaints:

File No. 17016: Complaint filed by Jerry Dratler against Ben Rosenfield and the Office of the Controller for allegedly violating Administrative Code (Sunshine Ordinance), Section 67.21, by failing to respond to a request for public records in a timely and/or complete manner.

File No. 17017: Complaint filed by Dolores Clean against Randy Quezada and the Department of Homelessness and Supporting Housing for allegedly violating Administrative Code (Sunshine Ordinance), Section 67.21, by failing to respond to a request for public records in a timely and/or complete manner.

File No. 17018: Complaint filed by Josh Wolf against President London Breed, Board of Supervisors, for allegedly violating Administrative Code (Sunshine Ordinance), Section 67.25, by failing to respond to an Immediate Disclosure Request in a timely and/or complete manner.

File No. 17023: Complaint filed by Ann Treboux against Margaret Baumgartner and the Office of the City Attorney, for allegedly violating Administrative Code (Sunshine Ordinance), Section 67.25, by failing to respond to an Immediate Disclosure Request in a complete and/or timely manner.

File No. 17024: Complaint filed by Gregory Berlin against the Office of the Treasurer and Tax Collector, for allegedly violating Administrative Code (Sunshine Ordinance), Section 67.21, for failure to respond to a request for public records in a timely and/or complete manner.


File No. 17025: Complaint filed by the SF Urban Forest Coalition against Michael Eng, Jonas Ionin, and Christine Silva, Planning Department, for allegedly violating Administrative Code (Sunshine Ordinance), Section 67.24(c), 67.25, and 67.34, for failure to respond to an Immediate Disclosure Request in a timely and/or complete manner.

The Task Force, upon receipt of the report and/or recommendation from the Committee, shall schedule and conduct a hearing on the merits of the complaint. Notice of hearing will be provided once the hearing date has been confirm.

Documentation (evidence supporting/disputing complaint)

For a document to be considered, it must be received at least five (5) working days before the hearing. For inclusion into the agenda packet, supplemental/supporting documents must be received by 5:00 pm, **April 18, 2017**.

Victor Young
Administrator
Sunshine Ordinance Task Force
1 Dr. Carlton B. Goodlett Place, City Hall., Room 244
San Francisco CA 94102
phone 415-554-7724 | fax 415-554-5163
victor.young@sfgov.org | www.sfbos.org

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