



CITY AND COUNTY OF SAN FRANCISCO
DEPARTMENT OF ELECTIONS

John Arntz, Director

Official Filing Form

For the Ballot: Candidate's Name, Ballot Designation

(CAEC §§ 13104, 13106-13107; SF MEC §§ 205, 225)

SAN FRANCISCO FILED 2022 AUG 12 PM 1:24 DEPARTMENT OF ELECTIONS	
Issued by: _____	Date: _____

I request that my name and ballot designation appear as follows:

Karen Freshman

Print your name as it should appear on the ballot

Diversity Inclusion Educator
~~Diversity Inclusion Educator~~

Print your ballot designation as it should appear on the ballot. (generally 3 word maximum) If none is requested, write "none" and initial it. The word "none" will not appear on the ballot.

For the Ballot: Name in Chinese

(SF MEC § 401)

The names of candidates appear on the official ballot in traditional Chinese characters as well as in English. The Department of Elections can provide this transliteration or translation for candidates for local office, or the candidate may provide documentation of established use of a name in Chinese. The California Secretary of State provides Chinese transliterations for candidates running for state and federal offices.

Check one option:



I request that the Department of Elections, working with a qualified Chinese-language translator, provide a Chinese transliteration or translation of my name for all materials where it is legally required.



I am providing documentation of established use of a particular Chinese transliteration or translation of my name for the Department to review. I understand that the Department's decision whether to accept a proposed transliteration or translation is final.

Requested name in Chinese: _____

English (415) 554-4375

Fax (415) 554-7344

TTY (415) 554-4386

sfelections.org

1 Dr. Carlton B. Goodlett Place

City Hall, Room 48, San Francisco, CA 94102

中文 (415) 554-4367

Español (415) 554-4366

Filipino (415) 554-4310



California Secretary of State
BALLOT DESIGNATION WORKSHEET

(Elections Code §§ 13107, 13107.3, 13107.5; California Code of Regulations § 20711)

SAN FRANCISCO

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2022 AUG 12 PM 1:01

DEPARTMENT OF ELECTIONS

This entire form **must be completed**, or it will not be accepted and you will **not** be entitled to a ballot designation. **DO NOT LEAVE ANY RESPONSE SPACES BLANK.** If information requested is not applicable, please write "N/A" in the space provided, otherwise the information **MUST** be provided. **UPO FILING, THIS WORKSHEET WILL BE A PUBLIC RECORD.**

Candidate Information	1	Candidate Name:	Karen Fleshman				
		Gender (optional, for translation use only):	woman				
		Office:	Board of Education Commissioner				
		Email:	[REDACTED]				
		Home Address:	[REDACTED]				
		Mailing Address:	[REDACTED]				
		Business Address:	[REDACTED]				
Attorney Information	2	Phone Number Business:	[REDACTED]	Home/Mobile:	[REDACTED]	Fax:	n/a
		Attorney Name (or other person authorized to act on your behalf):	n/a				
		Address:	n/a				
		Phone Number:	n/a	Mobile:	n/a	Fax:	n/a

You may select as your ballot designation one of the following designations:

- (a) Your current principal profession(s), vocation(s), or occupation(s) [maximum total of three words, separated by a slash ("/")].
- (b) The full title of the public office you currently occupy and to which you were elected.
- (c) "Appointed [full title of public office]" if you currently serve by appointment in an elective public office and are seeking election to the same office or to some other office.
- (d) "Incumbent" if you were elected (or, if you are a Superior Court Judge, you are a candidate for the same office that you hold) to your current public office and seek election to the same office.
- (e) "Appointed Incumbent" if you were appointed to your current elective public office and seek election to the same office.

Proposed Ballot Designation(s)	3	Proposed Ballot Designation(s):	Diversity Inclusion Educator		
		Alternate Ballot Designation(s) 1:	Diversity Inclusion Practitioner		
		Alternate Ballot Designation(s) 2:			

In the spaces provided on the next page(s):

- (a) Describe why you believe you are entitled to use the proposed ballot designation.
- (b) If your proposed ballot designation contains one or more slashes ("/") separating words in your ballot designation for separate principal profession(s), vocation(s), or occupation(s) (collectively known as "PVOs"), complete a justification section for each separate PVO.
- (c) Attach any documents or exhibits that you believe support your proposed ballot designation.
- (d) If using the title of an elective office, attach a copy of your certificate of election or appointment.
- (e) Any supporting documents will not be returned to you. **Do not submit originals.**

It is your responsibility to justify your proposed ballot designation and to provide all requested details.

If your proposed ballot designation includes the word "volunteer," indicate the title of your volunteer position and the name of the entity for which you volunteer along with a brief description of the type of volunteer work you do and the approximate amount of time involved. You may only use the ballot designation "community volunteer" if you volunteer for a 501(c)(3) charitable, educational, or religious organization, a governmental agency or an educational institution. You may not use "community volunteer" together with another designation.



If your proposed ballot designation contains **one or more slashes ("/")** separating multiple principal profession(s), vocation(s), or occupation(s) (collectively known as "PVOs"), **complete a justification section for each separate PVO.**

Justification for use of Proposed Ballot Designation(s)
If you are proposing alternate ballot designations, please provide justification for use of those on Page 3.

4

Justification for use of 1st PVO:
I make my living educating people in the workplace on diversity and inclusion practices overcoming unconscious bias, recognizing intervening in microaggressions, ending sexual harassment, becoming allies, relating across difference as equals, etc.

Current or most recent job title: Founder and CEOStart/End Dates: 12/2014-present

Employer Name or Business: Racy Conversations

Person who can verify this information:
Name: Ivellisse MoralesPhone Number(s): 6177566005Email: ivellisse@bombilla.co

Justification for use of 2nd PVO:
n/a

Current or most recent job title:Start/End Dates:

Employer Name or Business:

Person who can verify this information:
Name:Phone Number(s):Email:

Justification for use of 3rd PVO:
n/a

Current or most recent job title:Start/End Dates:

Employer Name or Business:

Person who can verify this information:
Name:Phone Number(s):Email:

Before signing below, answer/initial the following questions. Does your proposed ballot designation:

1) Use only a portion of the title of your current elected office?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Initial <u>KF</u>
2) Non-judicial candidates: Use only the word "Incumbent" for an elective office to which you were appointed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Initial <u>KE</u>
3) Use more than three total words for your principal professions, vocations, or occupations?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Initial <u>KE</u>
4) Suggest an evaluation of you, such as outstanding, leading, expert, virtuous, or eminent?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Initial <u>KE</u>
5) Refer to a status (Veteran, Activist, Founder, Scholar), rather than a profession, vocation, or occupations?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Initial <u>KE</u>
6) Abbreviate the word "retired"?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Initial <u>KE</u>
7) Place the word "retired" after the words it modifies? Example: Accountant, retired	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Initial <u>KE</u>
8) Use an word or prefix (except "retired") such as "former" or "ex-" to refer to a former profession, vocation, or occupation?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Initial <u>KE</u>
9) Use the word "retired" along with a current profession, vocation, or occupation? Example: Retired Firefighter/Teacher	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Initial <u>KE</u>
10) Use the name of a political party or political body?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Initial <u>KE</u>
11) Refer to a racial, religious, or ethnic group?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Initial <u>KE</u>
12) Refer to any activity prohibited by law?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Initial <u>KE</u>

If the answer to any of these questions is "yes," your proposed ballot designation is likely to be rejected.

X

8/12/22

8

12

22

Candidate's SignatureDate Signed:MonthDayYear

For your reference, attached are Elections Code sections 13107, 13107.3, and 13107.5, and California Code of Regulations (CCR), title 2, section 20711. You also may wish to consult CCR, title 2, sections, 20712-20719 (found at www.sos.ca.gov).



COMPLETE THIS PAGE ONLY IF one or more **Alternate Ballot Designation(s)** are provided. If this page is not applicable, please initial: _____

Justification for
Alternate Ballot
Designation(s) 1

A

Justification for use of 1 st PVO: <small>I am the founder and CEO of Racy Conversations, a company that helps workplaces become more diverse and inclusive. I founded Racy Conversations in 2014. I make my living assessing workplace culture, coaching leaders, consulting on policies and practices and facilitating workshops on diversity and inclusion practices, including: overcoming unconscious bias, recognizing and intervening in microaggressions, becoming an ally, ending sexual harassment, relating across difference as equals.</small>		
Current or most recent job title:	Founder and CEO	Start/End Dates: 12/14-present
Employer Name or Business:	Racy Conversations	
Person who can verify this information:		
Name: Ivellisse Morales	Phone Number(s): 6177566005	Email: ivellisse@bombilla.co
Justification for use of 2 nd PVO: n/a		
Current or most recent job title:	Start/End Dates:	
Employer Name or Business:		
Person who can verify this information:		
Name:	Phone Number(s):	Email:
Justification for use of 3 rd PVO: n/a		
Current or most recent job title:	Start/End Dates:	
Employer Name or Business:		
Person who can verify this information:		
Name:	Phone Number(s):	Email:

Justification for
Alternate Ballot
Designation(s) 2

B

Justification for use of 1 st PVO: n/a		
Current or most recent job title:	n/a	Start/End Dates:
Employer Name or Business:		
Person who can verify this information:		
Name:	Phone Number(s):	Email:
Justification for use of 2 nd PVO: n/a		
Current or most recent job title:	Start/End Dates:	
Employer Name or Business:		
Person who can verify this information:		
Name:	Phone Number(s):	Email:
Justification for use of 3 rd PVO: n/a		
Current or most recent job title:	Start/End Dates:	
Employer Name or Business:		
Person who can verify this information:		
Name:	Phone Number(s):	Email:

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Date Initial Filing Received
Filing Official Use Only

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2022 AUG 12 PM 1:25

DEPARTMENT OF ELECTIONS

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Fleshman Karen Kay

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Board of Education

Division, Board, Department, District, if applicable

Your Position

San Francisco Unified School District

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, Retired Judge, Pro Tem Judge, or Court Commissioner
(Statewide Jurisdiction)

☐ Multi-County _____

☐ County of _____

☐ City of _____

☒ Other City and County of San Francisco

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

☐ Annual: The period covered is January 1, 2021, through
December 31, 2021.

-or-

The period covered is ____/____/____, through
December 31, 2021.

☐ Leaving Office: Date Left ____/____/____
(Check one circle.)

☐ The period covered is January 1, 2021, through the date of
leaving office.

-or-

☐ Assuming Office: Date assumed ____/____/____

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

☒ Candidate: Date of Election 11/8/2022 and office sought, if different than Part 1: _____

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

Schedules attached

☒ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☐ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or- ☐ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)

DAYTIME TELEPHONE NUMBER EMAIL 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 8/11/2022
(month, day, year)

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

Print

Clear

SCHEDULE A-1
Investments
Stocks, Bonds, and Other Interests
(Ownership Interest is Less Than 10%)
Investments must be itemized.
Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name: Karen Fleshman

NAME OF BUSINESS ENTITY: Fidelity Investments
GENERAL DESCRIPTION OF THIS BUSINESS: Retirement Account
FAIR MARKET VALUE: \$100,001 - \$1,000,000
NATURE OF INVESTMENT: Other 401k
IF APPLICABLE, LIST DATE: / /21 ACQUIRED / /21 DISPOSED

NAME OF BUSINESS ENTITY: Saint Francis Square Housing Cooperative
GENERAL DESCRIPTION OF THIS BUSINESS: housing cooperative
FAIR MARKET VALUE: \$100,001 - \$1,000,000
NATURE OF INVESTMENT: Other shares in coop + leasehold
IF APPLICABLE, LIST DATE: / /21 ACQUIRED / /21 DISPOSED

NAME OF BUSINESS ENTITY:
GENERAL DESCRIPTION OF THIS BUSINESS:
FAIR MARKET VALUE:
NATURE OF INVESTMENT:
IF APPLICABLE, LIST DATE:

NAME OF BUSINESS ENTITY:
GENERAL DESCRIPTION OF THIS BUSINESS:
FAIR MARKET VALUE:
NATURE OF INVESTMENT:
IF APPLICABLE, LIST DATE:

NAME OF BUSINESS ENTITY:
GENERAL DESCRIPTION OF THIS BUSINESS:
FAIR MARKET VALUE:
NATURE OF INVESTMENT:
IF APPLICABLE, LIST DATE:

NAME OF BUSINESS ENTITY:
GENERAL DESCRIPTION OF THIS BUSINESS:
FAIR MARKET VALUE:
NATURE OF INVESTMENT:
IF APPLICABLE, LIST DATE:

Comments:

Print Clear

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
Karen Fleshman

1. BUSINESS ENTITY OR TRUST
Racy Conversations
Name
5 Galilee Lane #2 San Francisco CA 94115
Address (Business Address Acceptable)
Check one
[] Trust, go to 2 [x] Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS
workplace diversity and inclusion education
FAIR MARKET VALUE
[] \$0 - \$1,999
[] \$2,000 - \$10,000
[] \$10,001 - \$100,000
[x] \$100,001 - \$1,000,000
[] Over \$1,000,000
IF APPLICABLE, LIST DATE:
/ / 21 ACQUIRED / / 21 DISPOSED
NATURE OF INVESTMENT
[] Partnership [] Sole Proprietorship [x] s- corporation
Other
YOUR BUSINESS POSITION owner
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
[] \$0 - \$499 [] \$10,001 - \$100,000
[] \$500 - \$1,000 [x] OVER \$100,000
[] \$1,001 - \$10,000
3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)
[] None or [x] Names listed below
2021: Johnson & Johnson, ASG, AMGEN
2022: Cornerstone Consulting, Canaan Partners
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
none
Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE
[] \$2,000 - \$10,000
[] \$10,001 - \$100,000
[] \$100,001 - \$1,000,000
[] Over \$1,000,000
IF APPLICABLE, LIST DATE:
/ / 21 ACQUIRED / / 21 DISPOSED
NATURE OF INTEREST
[] Property Ownership/Deed of Trust [] Stock [] Partnership
[] Leasehold Yrs. remaining [] Other
[] Check box if additional schedules reporting investments or real property are attached

1. BUSINESS ENTITY OR TRUST
Karen Fleshman Revocable Trust
Name
5 Galilee Lane #2 San Francisco CA 94115
Address (Business Address Acceptable)
Check one
[x] Trust, go to 2 [] Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS
estate planning- assets flow into it via my will
FAIR MARKET VALUE
[] \$0 - \$1,999
[] \$2,000 - \$10,000
[] \$10,001 - \$100,000
[] \$100,001 - \$1,000,000
[] Over \$1,000,000
IF APPLICABLE, LIST DATE:
/ / 21 ACQUIRED / / 21 DISPOSED
NATURE OF INVESTMENT
[] Partnership [] Sole Proprietorship [x] Revocable trust
Other
YOUR BUSINESS POSITION Trustor and Trustee
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
[x] \$0 - \$499 [] \$10,001 - \$100,000
[] \$500 - \$1,000 [] OVER \$100,000
[] \$1,001 - \$10,000
3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)
[] None or [] Names listed below
4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:
[] INVESTMENT [] REAL PROPERTY
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
none
Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE
[] \$2,000 - \$10,000
[] \$10,001 - \$100,000
[] \$100,001 - \$1,000,000
[] Over \$1,000,000
IF APPLICABLE, LIST DATE:
/ / 21 ACQUIRED / / 21 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:



CITY AND COUNTY OF SAN FRANCISCO
DEPARTMENT OF ELECTIONS

John Arntz, Director

SAN FRANCISCO
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2022 AUG 12 PM 1:24

DEPARTMENT OF ELECTIONS

Issued by: _____

Date: __/__/__

Official Filing Form

Candidate Statement of Qualifications

CAEC §§ 13307-13308

Candidate Name Karen Freshman

Office Sought Board of Education Commissioner

Election Date November 8, 2022

Complete one of the following sections:

☐ I will NOT file a Candidate Statement of Qualifications

Signature of Candidate: _____ Date _____

☒ I will file a Candidate Statement of Qualifications

☒ To facilitate typesetting, and reduce the possibility of transcription error, I am sending an electronic copy of my statement text within 24 hours after submission to the Department at publications@sfgov.org.

Signature of Candidate: _____ Date 8/10/2022

Name as it will appear with statement: Karen Freshman

My occupation is Diversity Inclusion Educator

My qualifications are: _____

Keep Text Within the Vertical Lines

I'm an SFUSD parent volunteer, public school graduate, retired educator's daughter, small business owner, and attorney. I love my children's schools and want to build on all the good at SFUSD by listening, building bridges, and problemsolving. We need safe and positive schools in every neighborhood providing high expectations and high support for all young people, families, and educators.

For 20+ years I worked for local government agencies and nonprofits to prepare young people for success in college, careers, and life, becoming a mentor to many. My mentees inspired me to become a diversity inclusion educator helping workplaces shift their culture to be safe and positive for everyone.

I will bring my experience to ensure every SFUSD student thrives and graduates ready for college or careers.

To get there, we must start early with all students enrolling in transitional kindergarten, reading at grade level in elementary, ready for high school by eighth grade, and supported from ninth grade through graduation with an individualized plan for their future, paid summer jobs, enrichment activities.

My priorities:

- Invest in students' and educators' academic and social-emotional wellbeing
- Provide budget transparency and accountability
- Promote collaborative decisionmaking

Unifying San Francisco for San Francisco Unified

karenforsfschools.com

This statement will be reproduced exactly as written. You may not make changes or corrections after the deadline for filing. Please type or print neatly. If handwritten information or a revision is unclear, Department staff will interpret the handwritten information to the best of their abilities; this interpretation is final.

English (415) 554-4375

Fax (415) 554-7344

TTY (415) 554-4386

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City Hall, Room 48, San Francisco, CA 94102

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