

John Arntz, Director

Date: 3/10/02

SAN FRANCISCO FILED

2022 AUG 10 AM 9: 22

DEPARTMENT OF ELECTIONS

DEPARTMENT OF THE

Issued by: 45

Official Filing Form

For the Ballot: Term, Candidate's Name, Ballot Designation (CAEC §§ 13104, 13106-13107; SF MEC §§ 205, 225)

l, × o Signatu	Member, Community College Board of Trustees, 4-year term Member, Community College Board of Trustees, 2-year term re: Date:
l reques	et that my name and ballot designation appear as follows:
Tol Print your n	Will Pires Juil Coulourity Enland Print your ballot designation as it should appear on the ballot. (generally 3 food maximum) in none is requested, write "none" and initial it. The word "none" will not appear on the ballot.
For the	e Ballot: Name in Chinese
Departn provide	nes of candidates appear on the official ballot in traditional Chinese characters as well as in English. The nent of Elections can provide this transliteration or translation for candidates for local office, or the candidate may documentation of established use of a name in Chinese. The California Secretary of State provides Chinese rations for candidates running for state and federal offices.
Check	one option:
X	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:

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. UPON FILING, THIS WORKSHEET WILL BE A PUBLIC DOCUMENT.

	St	Candidate Name: J dulle	lizao G	ender (optional, for translation use only):	
		Office: Psinaryith	20 Urue Grard E	mail:	_
Candidate Information	1	Home Address:			
mormation		Mailing Address:			
	Se.	Business Address:			
		Phone Nur Business:	Home/Mobil		
		Attorney Name (or other person auti	norized to act on your behalf):		
Attorney Information	2	Address:	+		
		Phone Number(s) Business:	Mobile:	Fax:	

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. NOTE: A candidate for the office of Representative in Congress, Member of the State Board of Equalization, State Senator, or Member of the Assembly shall not choose the word "incumbent" as a designation to appear on the hallot
- (e) "Appointed Incumbent" if you were appointed to your current elective public office and seek election to the same office.

Proposed Ballot Designation(s) Proposed Ballot Designation(s): Vice Possident countrité allege Bourd

Alternate Ballot Designation(s) 1: I we will best

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.

Rev 06/2022

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	1st PVO:	(hance	168800	css.adu
Justification		1	hess: Columbia (Company) this information: Phone Number	1916-53	Start/End Start/End Start/End	Dates: 111/2	Z- Slago F
for use of Proposed Ballot Designation(s) If you are		Justification for use of	2 nd PVO:			Sport	
proposing alternate ballot	4	Current or most recent jo	b title: Incomba	it	Start/End I	Dates: L (2(>	2
designations, please provide		Employer Name or Busin					
justification for		Person who can verify	this information: Salue		de		
use of those on Page 3.		Name: Justification for use of	Phone Number	s):	Email		
		Current or most recent jo	b title:		Start/End [Dates:	
		Employer Name or Busin	I m Silve took				
		Person who can verify t		x 07	-		
		Name:	Phone Number(s):-	Email:		
And Association Section	(0)	answer/initial the follow	ring questions. Does your pro	posed ballot design	nation:	Mes No	Initial A
2) Non-judic 3) Use more 4) Suggest a 5) Refer to a 6) Abbreviat 7) Place the 8) Use a wo 9) Use the w 10) Use the n 11) Refer to a	than than evaluation status the word "reformed free ame of racial,	idates: Use only the word "I ree total words for your prin ation of you, such as outsta (Veteran, Activist, Founder, ord "retired? etired" after the words it mo- efix (except "retired") such a	ncumbent" for an elective office to cipal professions, vocations, or occurring, leading, expert, virtuous, or Scholar), rather than a profession, diffies? Example: Accountant, retires "former" or "ex-" to refer to a form of ession, vocation, or occupation?	eminent? vocation, or occupation d er profession, vocation	ns?	Pes DNo	Initial Initia
	100	707. 7	se questions is "yes," your p	roposed ballot design	gnation is likely		THE
Х					T31	101	22
				Date Signed:	Month	Day	Year

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:

JOHN LETE THIOT?				
		Justification for use of 1st PVO:		
		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 2 nd PVO:		
Justification for Alternate Ballot	A	Current or most recent job title:		Start/End Dates:
Designation(s) 1		Employer Name or Business:		
		Person who can verify this information:		
		Name:	Phone Number(s):	Email:
		Justification for use of 3 rd PVO:		
		Current or most recent job title:		Start/End Dates:
		Employer Name or Business:		
	200	Person who can verify this information:		
		Name:	Phone Number(s):	Email:
	_			
		Justification for use of 1st PVO:		
				Start/End Dates:
		Current or most recent job title:		Start/End Dates:
				Start/End Dates:
		Current or most recent job title: Employer Name or Business:	Phone Number(s):	Start/End Dates: Email:
		Current or most recent job title: Employer Name or Business: Person who can verify this information:	Phone Number(s):	
Justification for		Current or most recent job title: Employer Name or Business: Person who can verify this information: Name:	Phone Number(s):	
Justification for Alternate Ballot	В	Current or most recent job title: Employer Name or Business: Person who can verify this information: Name:	Phone Number(s):	
	В	Current or most recent job title: Employer Name or Business: Person who can verify this information: Name: Justification for use of 2 nd PVO: Current or most recent job title: Employer Name or Business:	Phone Number(s):	Email:
Alternate Ballot	В	Current or most recent job title: Employer Name or Business: Person who can verify this information: Name: Justification for use of 2 nd PVO: Current or most recent job title: Employer Name or Business: Person who can verify this information:		Email: Start/End Dates:
Alternate Ballot	В	Current or most recent job title: Employer Name or Business: Person who can verify this information: Name: Justification for use of 2 nd PVO: Current or most recent job title: Employer Name or Business: Person who can verify this information: Name:	Phone Number(s):	Email:
Alternate Ballot	В	Current or most recent job title: Employer Name or Business: Person who can verify this information: Name: Justification for use of 2 nd PVO: Current or most recent job title: Employer Name or Business: Person who can verify this information:		Email: Start/End Dates:
Alternate Ballot	В	Current or most recent job title: Employer Name or Business: Person who can verify this information: Name: Justification for use of 2 nd PVO: Current or most recent job title: Employer Name or Business: Person who can verify this information: Name:		Email: Start/End Dates:
Alternate Ballot	В	Current or most recent job title: Employer Name or Business: Person who can verify this information: Name: Justification for use of 2 nd PVO: Current or most recent job title: Employer Name or Business: Person who can verify this information: Name: Justification for use of 3 rd PVO:		Email: Start/End Dates: Email:
Alternate Ballot	В	Current or most recent job title: Employer Name or Business: Person who can verify this information: Name: Justification for use of 2 nd PVO: Current or most recent job title: Employer Name or Business: Person who can verify this information: Name: Justification for use of 3 rd PVO: Current or most recent job title:		Email: Start/End Dates: Email:

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CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COM

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A Public Document

Date Initial Filing Received
Filing Official Use Only

SAN FRANCISCO 2 DM 4: 22

Please type or print in ink.	2022 AUG 10 FM
NAME OF FILER (LAST)	(FIRST) OFMIDDLEY
Rizzo, John	(FIRST) DEPARTMENT OF MIDDLEY THOMS
1. Office, Agency, or Court	
Agency Name (Do not use acronyms)	
City and County of San Francisco	
Division, Board, Department, District, if applicable	Your Position
Community College District	Member of the Board of Trustees
► If filing for multiple positions, list below or on an attachment. (Do not u	ise acronyms)
2004 - CONCOUNTERCOND - GO PRINCE PROCESSOR CONTRACTOR	© 100 m = 100
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	
X City of San Francisco	Other
3. Type of Statement (Check at least one box)	
X Annual: The period covered is January 1, 2021 through	Leaving Office: Date Left/
December 31, 2021.	(Check one circle)
The period covered is/, through December 31, 2021.	 The period covered is January 1, 2021 through the date of leaving office.
Assuming Office: Date assumed	 The period covered is/, through the date of leaving office.
Candidate:Date of Election and office sought, i	f different than Part 1:
4. Schedule Summary (must complete) ► Total number	of pages including this cover page:3
Schedules attached	or pages metaling the sever page.
Schedule A-1 - Investments - schedule attached	Schedule C - Income, Loans, & Business Positions – schedule attached
X Schedule A-2 - Investments - schedule attached	Schedule D - Income – Gifts – schedule attached
X Schedule B - Real Property - schedule attached	Schedule E - Income - Gifts - Travel Payments - schedule attached
-or-	The state of the
None - No reportable interests on any schedule	
5. Verification	
MAILING ADDRESS STREET CITY	STATE ZIP CODE
(Rusiness or Agency Address Recommended , Public Cocument)	
DAYTIME TELEDHONE NUMBER	S HALL ADDOCCO
THAT I SHE TELEPHINE NI INSER	E-MAIL ADDRESS
I have used all reasonable diligence in preparing this statement. I have re herein and in any attached schedules is true and complete. I acknowled	eviewed this statement and to the best of my knowledge the information contained to this is a public document
I certify under penalty of perjury under the laws of the State of Calif	
Date Signed 03/15/2022 (month, day, year)	Signature John Riz
	11.10

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

CALIE	ORNIA	FORE	ŋ 7/	[1]	
	ITICAL PR			IISSIC	ď
Name	Mangapatha Manada ang dan dan dan dan				the Charles
Rizzo,	John				

▶ 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
John Rizzo (self employed)	
Name 1621 Waller St #2 San Francisco, CA 94117	Name
Address (Business Address Acceptable) Check one	Address (Business Address Acceptable) Check one
Trust, go to 2 X Business Entity, complete the box, then go to 2	☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
freelance writing, editing, consulting	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
S0 - \$1,999 \$2,000 - \$10,000 _//21	\$0 - \$1,999 \$2,000 - \$10,000//21
X \$10,001 - \$100,000 ACQUIRED DISPOSED	\$10,001 - \$100,000 ACQUIRED DISPOSED
S100,001 - \$1,000,000	\$100,001 - \$1,000,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INVESTMENT Partnership Sole Proprietorship X self-employment	NATURE OF INVESTMENT
Other	Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION self-employed	YOUR BUSINESS POSITION
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>10</u> THE ENTITY/TRUST)
S0 - \$499 X \$10,001 - \$100,000	□ \$0 - \$499 □ \$10,001 - \$100,000
S500 - S1,000 OVER \$100,000	S500 - \$1,000 OVER \$100,000
S1,001 - \$10,000	
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)
X None or Names listed below	None or Names listed below
	Name of the state
447744	
WESTER AND LONG TO THE PROPERTY OF THE PROPERT	
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
NVESTMENT REAL PROPERTY	INVESTMENT REAL PROPERTY
Control Contro	Land V. M. C.
Name of Business Entity, if Investment or	Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property	Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
only of Other Fredise Education of Real Property	City of Other Fredise Cocation of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000 / /21 / /21
S100,001 - \$1,000,000 ACQUIRED DISPOSED	\$10,001 - \$100,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Property Ownership/Deed of Trust Stock Partnership	Property Ownership/Deed of Trust Stock Partnership
Factoring granted	
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
'	1 and attached
Comments:	

FPPC Form 700 - Schedule A-2 (2021/2022) advice@fppc.ca.gov • 866-275-3772 • www.fppc.ca.gov

SCHEDULE B Interests in Real Property (Including Rental Income)

不能的公共市场的企业	ORNIA			
Name				
Rizzo,	John	 ~~~	William and a second	

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
1621 Waller Street Apt !	
CITY	CITY
San Francisco	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
S2,000 - \$10,000 S10,001 - \$100,000	S2,000 - \$10,000
S100,001 - S1,000,000 ACQUIRED DISPOSED	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
X Ownership/Deed of Trust Easement	Ownership/Deed of Trust Easement
Leasehold	Leasehold
Yrs. remaining Other	Yrs. remaining Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
S0 - \$499 S500 - \$1,000 S1,001 - \$10,000	S0 - \$499 S500 - \$1,000 S1,001 - \$10,000
X \$10,001 - \$100,000	S10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
Ari and Mara Feingold	None
You are not required to report loans from a commercial business on terms available to members of the public w	lending institution made in the lender's regular course of vithout regard to your official status. Personal loans and
business on terms available to members of the public w loans received not in a lender's regular course of business	vithout regard to your official status. Personal loans and
business on terms available to members of the public w loans received not in a lender's regular course of business	vithout regard to your official status. Personal loans and
business on terms available to members of the public w	vithout regard to your official status. Personal loans and ess must be disclosed as follows:
business on terms available to members of the public w loans received not in a lender's regular course of busine NAME OF LENDER*	vithout regard to your official status. Personal loans and ess must be disclosed as follows: NAME OF LENDER*
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business on terms available to members of the public w loans received not in a lender's regular course of busine NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) None	without regard to your official status. Personal loans and ess must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) % None
business on terms available to members of the public w loans received not in a lender's regular course of busine NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) Whose HIGHEST BALANCE DURING REPORTING PERIOD	without regard to your official status. Personal loans and ess must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)
business on terms available to members of the public we loans received not in a lender's regular course of business name of Lender* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)	without regard to your official status. Personal loans and ess must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)
business on terms available to members of the public w loans received not in a lender's regular course of busine NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) Whose HIGHEST BALANCE DURING REPORTING PERIOD	without regard to your official status. Personal loans and ess must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) ———————————————————————————————————
business on terms available to members of the public we loans received not in a lender's regular course of business name of Lender* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)	without regard to your official status. Personal loans and ess must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)

FPPC Form 700 Schedule B (2021/2022) advice@fppc.ca.gov • 866-275-3772 • www.fppc.ca.gov



John Arntz, Director

Official Filing Form
Candidate Statement of Qualifications

CAEC §§ 13307-13308

Candidate Name John Russo

20 Win with Rolling Good

SAN FRANCISCO FILED

2022 AUG 10 AM 9: 23

DEPARTMENT OF ELECTIONS

Issued by: ______ Date: 3/id/1~

Election Date Nov	rember 8, 2022				
Complete one of th	e following sec	tions:			
☐ I will NOT fi	le a Candidate S	Statement of C	Qualifications		
Signature of Candida	ate:			Date	
□ I will file a C	andidate Staten	nent of Qualific	cations		
To facilitate text within 2		reduce the p		cription error, I ar publications@s	n sending an electronic copy of my statement gov.org.
Signature of Candida	nte:			Date	
Name as it will appea My occupation is _ My qualifications a	Sice Por	esident,	BC JULLI		yspond
◆		Keep	Text Within the \	Vertical Lines	———

During the Pandemic, when California Community Colleges lost 20% of their students and City College lost vital tax revenue, I got to work delivering solutions. We stabilized the finances and ended the structure deficits. We satisfied all financial requirements of accreditation, the state, and our auditors. And we now have a healthy reserve fund to get City College through the next recession.

As Facilities Chair, I worked to move quickly on the 2020 bond measure: we will soon start construction on three new state-of-the-art classroom buildings to replace dilapidated facilities, and a fourth is in design. And, I helped secure 100+ new affordable housing units for faculty and staff.

I have incorporated my work as an environmental activist with the Sierra Club to create climate policy for City College, with new buildings powered by geothermal energy, electric car charging, and free transit passes for students.

Other solutions I am working on include building affordable housing for students, increasing student success rates, and eliminating inequitable barriers to diversity, equality, and inclusion.

My supporters include:

Senator Scott Wiener

Former Senator Mark Leno

Assemblyman Phil Ting

Supervisor Aaron Peskin

Supervisor Rafael Mandelman

Supervisor Gordon Mar

Every Community College Board member: Aliya Chisti, Brigitte Davila,

Murrell Green, Thea Selby, Shanell Williams, Alan Wong

The Sierra Club

www.johnrizzoforcollegeboard.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.

2022 AUG 10 AM 9: 22

Subject: Letter of Endorsement (November 2022 Election)

DEPARTMENT OF ELECTIONS

I, Ald Chish, am excited to endorse John Rizzo for City College Board of Trustee in San Francisco in the November 8, 2022 election.

By signing below I agree to lend my name, title, and photo for use on the official ballot statement and other campaign materials deemed necessary.

Name (print): Aliga Chists

Signature:

08/08/22

SAN FRANCISCO FILED

Subject: Letter of Endorsement (November 2022 Election) 2022 AUG 10 PM 4: 22

I, Share I (William), am excited to endorse John Rizzo for City College Board of Trustee in San Francisco in the November 8, 2022 election.

By signing below I agree to lend my name, title, and photo for use on the official ballot statement and other campaign materials deemed necessary.

Name (print): Shahell Williams

Signature

Date:

122

SAN FRANCISCO FILED 2022 AUG 10 AM 9: 22 DEPARTMENT OF ELECTIONS

Subject: Letter of Endorsement (November 2022 Election)

I, _____, am excited to endorse John Rizzo for City College Board of Trustee in San Francisco in the November 8, 2022 election.

By signing below I agree to lend my name, title, and photo for use on the official ballot statement and other campaign materials deemed necessary.

Name (print): Morrell Green

Signature: (

Date: 8/7/22

SAN FRANCISCO FILED

2022 AUG 10 AM 9: 22

Subject: Letter of Endorsement (November 2022 Election)

DEPARTMENT OF ELECTIONS

I, Scott Wie am excited to endorse John Rizzo for City College Board of Trustee in San Francisco in the November 8, 2022 election.

By signing below I agree to lend my name, title, and photo for use on the official ballot statement and other campaign materials deemed necessary.

Name (print):

Signature:

Date:



SAN FRANCISCO FILED

2022 AUG 10 AM 9: 23

PO Box 2663, Berkeley, CA 94702

August 4, 2022

To Whom It May Concern:

This is to confirm that the Sierra Club endorses John Rizzo for San Francisco Community College Board in the election of November 8, 2022. John Rizzo is authorized to list the Sierra Club in his ballot statement and campaign materials.

Sincerely,

Chair, San Francisco Group Sierra Club

2022 AUG 10 AM 9: 23

Subject: Letter of Endorsement (November 2022 Election)

I, WARK Separate and an excited to endorse John Rizzo for City College Board of ELECTIONS Trustee in San Francisco in the November 8, 2022 election.

By signing below I agree to lend my name, title, and photo for use on the official ballot statement and other campaign materials deemed necessary.

Name (print):

SAN FRANCISCO FILED 2022 AUG 10 AM 9: 23

Subject: Letter of Endorsement (November 2022 Election)

I, ARON PESKEN, am excited to endorse John Rizzo for City College Board of NS Trustee in San Francisco in the November 8, 2022 election.

By signing below I agree to lend my name, title, and photo for use on the official ballot statement and other campaign materials deemed necessary.

Name (print):

HARON PESKEN

Signature:

Date.

8/1/22