



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 10 PM 4:22 DEPARTMENT OF ELECTIONS	
Issued by: <u>Sy</u>	Date: <u>7/20/22</u>

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

JOAQUÍN TORRES

Print your name as it should appear on the ballot

Assessor-Recorder, CITY AND COUNTY OF SAN FRANCISCO

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: (attached)

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

Joaquín Torres

郭華健

SAN FRANCISCO  
FILED

2022 AUG 10 PM 4:22

DEPARTMENT OF ELECTIONS



City and County of San Francisco  
**Department of Elections**  
John Arntz, Director

Date: <u>7/10/22</u>	Issued by: <u>SY</u>
SAN FRANCISCO FILED	
2022 AUG 10 PM 4:22	
DEPARTMENT OF ELECTIONS	

**Official Filing Form**

**Declaration of Qualification, Office of Assessor-Recorder**

(CAEC § 13.5; CA Gov. Code §§ 24002.5, SF Charter §§ 6.101)

I, Joaquín Torres, candidate for the office of **Assessor-Recorder**, hereby  
Print name of candidate  
declare under penalty of perjury under the laws of the State of California that I hold a valid appraiser's certificate at the time  
nomination documents are issued.

I acknowledge that:

(a) A person may not exercise the powers and duties of the office of assessor unless he or she holds a valid appraiser's certificate issued by the State Board of Equalization pursuant to Article 8 (commencing with Section 670) of Chapter 3 of Part 2 of Division 1 of the Revenue and Taxation Code.

(b) Notwithstanding subdivision (a), a duly elected or appointed person may exercise the powers and duties of assessor, for a period not to exceed one year, if he or she acquires a temporary appraiser's certificate from the State Board of Equalization no later than 30 days after taking office.

10 August 2022  
Date

Acceptable documentation: Certificates, declarations under penalty of perjury, diplomas, or official correspondence that the person meets each qualification

- ☐ See copies attached  
☒ None submitted

Staff Initials: MS Date: 8/10/22

English (415) 554-4375  
Fax (415) 554-7344  
TTY (415) 554-4386

[sfelections.org](http://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

Rev. 04.10.15





California Secretary of State  
BALLOT DESIGNATION WORKSHEET

November 8, 2022, General Election (Elections Code §§ 8168, 13107, 13107.3, 13107.5; California Code of Regulations § 20711)

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.**

2022 AUG 10 PM 4:22

SAN FRANCISCO  
DEPARTMENT OF ELECTIONS

Candidate  
Information

1

Candidate Name: Joaquín Torres

Gender (optional, for translation use only): male

Office: Assessor - Recorder

Email: [REDACTED]

Home Address: [REDACTED]

Mailing Address: [REDACTED]

Business Address: [REDACTED]

Phone Number(s): [REDACTED]

Business: [REDACTED]

Attorney  
Information

2

Attorney Name (or other person authorized to act on your behalf): N/A

Address: N/A

Phone Number(s): N/A

Business: 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. **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 ballot.**
- (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): Assessor - Recorder, City and County of San Francisco

Alternate Ballot Designation(s) 1: \_\_\_\_\_

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 1<sup>st</sup> PVO: After serving as the appointed Assessor-Recorder, I was elected to the position in February 2022.

Current or most recent job title: Assessor-Recorder Start/End Dates: January 27, 2021

Employer Name or Business: City and County of San Francisco

Person who can verify this information:

Name: Carol Isen Phone Number(s): 415-557-4800 Email: N/A

Justification for use of 2<sup>nd</sup> 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 3<sup>rd</sup> 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:

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?
- 2) Non-judicial candidates: Use only the word "Incumbent" for an elective office to which you were appointed?
- 3) Use more than three total words for your principal professions, vocations, or occupations?
- 4) Suggest an evaluation of you, such as outstanding, leading, expert, virtuous, or eminent?
- 5) Refer to a status (Veteran, Activist, Founder, Scholar), rather than a profession, vocation, or occupations?
- 6) Abbreviate the word "retired"?
- 7) Place the word "retired" after the words it modifies? Example: Accountant, retired
- 8) Use a word or prefix (except "retired") such as "former" or "ex-" to refer to a former profession, vocation, or occupation?
- 9) Use the word "retired" along with a current profession, vocation, or occupation? Example: Retired Firefighter/Teacher
- 10) Use the name of a political party or political body?
- 11) Refer to a racial, religious, or ethnic group?
- 12) Refer to any activity prohibited by law?

<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Initial
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Initial
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Initial
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Initial
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Initial
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Initial
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Initial
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Initial
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Initial
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Initial
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Initial
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Initial

Proposed ballot designation is likely to be rejected.

X

08 | 10 | 2022

Date Signed: Month Day Year

For your signature, please print your name and the date you signed. (California Code of Regulations (CCR), title 2, section 20711. You also may wish to consult CCR, title 2, section 20711.3 for more information.)





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

Justification for  
Alternate Ballot  
Designation(s) 1

A

Justification for use of 1 <sup>st</sup> 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 <sup>nd</sup> 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 3 <sup>rd</sup> 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  
Alternate Ballot  
Designation(s) 2

B

Justification for use of 1 <sup>st</sup> 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 <sup>nd</sup> 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 3 <sup>rd</sup> 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:

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION**STATEMENT OF ECONOMIC INTERESTS**  
**COVER PAGE**  
*A Public Document*Date Initial Filing Received  
Filing Official Use Only

1451122

Please type or print in ink.

NAME OF FILER

(LAST)

(FIRST)

Torres, Joaquin Nava

SAN FRANCISCO  
FILED  
2022 AUG 10 PM 4:23  
(MIDDLE)  
DEPARTMENT OF ELECTIONS**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

Assessor-Recorder

Assessor-Recorder

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: \*SEE ATTACHED FOR ADDITIONAL POSITIONS

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 San Francisco☒ City of San Francisco☐ Other**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.☐ Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_☐ Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one circle)☐ The period covered is January 1, 2021 through the date of  
leaving office.☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date  
of leaving office.☐ Candidate: Date of Election \_\_\_\_ and office sought, if different than Part 1: \_\_\_\_**4. Schedule Summary (must complete)**► Total number of pages including this cover page: 3**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

E-MAIL ADDRESS

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained  
herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 04/01/2022

(month, day, year)

Signature Joaquin Nava Torres

(File the original signature)

STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE  
Expanded Statement Attachment

CALIFORNIA FORM 700  
FAIR POLITICAL PRACTICES COMMISSION

Name

Joaquin Nava Torres

\* This table lists all positions including the primary position listed in the Office, Agency, or Court section of the Cover Page.

Agency	Div/Board/Dept/District	Position	Type of Statement	SAN #
City and County of San Francisco	Assessor-Recorder	Assessor-Recorder	Annual 1/1/2021 - 12/31/2021	060600029-NFH-0029
City and County of San Francisco	Housing Authority Commission	Commissioner	Annual 1/1/2021 - 12/31/2021	060600029-NFH-0029



SCHEDULE D  
Income – Gifts

▶ NAME OF SOURCE (Not an Acronym)

Warner Bros. Entertainment, Inc

ADDRESS (Business Address Acceptable)

4000 Warner Boulevard

Burbank, CA 91522

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Entertainment & Film Production Company

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 18 / 21	\$ 250.00	One Film Premiere Ticket
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

Comments: I attended the event with my wife. I paid for her ticket of \$250. We did not attend afterparty.

SAN FRANCISCO  
FILED  
2022 AUG 10 PM 4:22  
DEPARTMENT OF ELECTIONS

AUTHORIZATION OF ENDORSEMENT BY INDIVIDUAL

Date: 8/8/2022

I, Nancy Pelosi wish to endorse (or support)  
(Printed name of endorser)

Joaquin Torres on their "Candidate Statement of Qualifications", for  
(Name of candidate)

the office of SF Assessor - Recorder in the upcoming November 8, 2022, Consolidated  
(Elected office)

General Election.



Signature of endorser

AUTHORIZATION OF ENDORSEMENT BY ORGANIZATION

USE ORGANIZATION'S LETTERHEAD

Date: \_\_\_\_\_

The \_\_\_\_\_ endorses (or supports)  
(Printed name of endorser)

\_\_\_\_\_ on their candidate statement, for the office of  
(Name of candidate)

\_\_\_\_\_ in the upcoming November 8, 2022, Consolidated  
(Elected office)

General Election.

By: \_\_\_\_\_  
(Printed Name of authorized representative)

Signature: \_\_\_\_\_  
(Signature of authorized representative)

Title: \_\_\_\_\_  
(Authorized officer of the organization)

SAN FRANCISCO  
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2022 AUG 10 PM 4:22

DEPARTMENT OF ELECTIONS

AUTHORIZATION OF ENDORSEMENT BY INDIVIDUAL

Date: 8/8/2022

I, Dianne Feinstein wish to endorse (or support)

(Printed name of endorser)

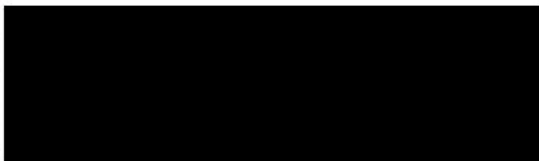
Joaquin Torres on their "Candidate Statement of Qualifications", for

(Name of candidate)

the office of Assessor in the upcoming November 8, 2022, Consolidated

(Elected office)

General Election.



Signature of endorser

AUTHORIZATION OF ENDORSEMENT BY ORGANIZATION

USE ORGANIZATION'S LETTERHEAD

Date: \_\_\_\_\_

The \_\_\_\_\_ endorses (or supports)

(Printed name of endorser)

\_\_\_\_\_ on their candidate statement, for the office of

(Name of candidate)

\_\_\_\_\_ in the upcoming November 8, 2022, Consolidated

(Elected office)

General Election.

By: \_\_\_\_\_

(Printed Name of authorized representative)

Signature: \_\_\_\_\_

(Signature of authorized representative)

Title: \_\_\_\_\_

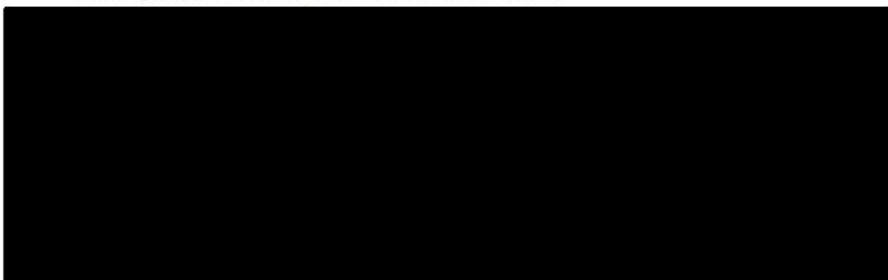
(Authorized officer of the organization)



LETTER OF ENDORSEMENT

July, 26, 2022

I, Governor Gavin Newsom wish to endorse Joaquin Torres on his "Candidate Statement of Qualifications" for the office of Assessor-Recorder in the upcoming November 8, 2022, Consolidated General Election.

A large black rectangular redaction box covering the signature of the endorser.

Signature of Endorser

SAN FRANCISCO  
FILED

2022 AUG 10 PM 4:22

DEPARTMENT OF ELECTIONS

AUTHORIZATION OF ENDORSEMENT BY INDIVIDUAL

Date:

7/22/22

SAN FRANCISCO  
FILED

2022 AUG 10 PM 4:22

DEPARTMENT OF ELECTIONS

I, FIONA MA wish to endorse (or support)

(Printed name of endorser)

JOAQUIN TORRES

(Name of candidate)

on their "Candidate Statement of Qualifications", for

the office of ASSESSOR-RECORDER in the upcoming November 8, 2022, Consolidated

(Elective office)

General Election.

Signature of endorser

AUTHORIZATION OF ENDORSEMENT BY ORGANIZATION

USE ORGANIZATION'S LETTERHEAD

Date: \_\_\_\_\_

The \_\_\_\_\_ endorses (or supports)

(Printed name of endorser)

\_\_\_\_\_ on their candidate statement, for the office of

(Name of candidate)

\_\_\_\_\_ in the upcoming November 8, 2022, Consolidated

(Elective office)

General Election.

By: \_\_\_\_\_

(Printed Name of authorized representative)

Signature: \_\_\_\_\_

(Signature of authorized representative)

Title: \_\_\_\_\_

(Authorized officer of the organization)

SAN FRANCISCO  
FILED

2022 AUG 10 PM 4:22

DEPARTMENT OF ELECTIONS

**AUTHORIZATION OF ENDORSEMENT BY INDIVIDUAL**


Date: 7/20/22

I, LOWDON BREED wish to endorse (or support)  
(Printed name of endorser)

JOAQUIN TORRES on their "Candidate Statement of Qualifications", for  
(Name of candidate)

the office of ASSESSOR-RECORDER in the upcoming November 8, 2022, Consolidated  
(Elected office)

General Election.



Signature of endorser

**AUTHORIZATION OF ENDORSEMENT BY ORGANIZATION**

USE ORGANIZATION'S LETTERHEAD

Date: \_\_\_\_\_

The \_\_\_\_\_ endorses (or supports)  
(Printed name of endorser)

\_\_\_\_\_ on their candidate statement, for the office of  
(Name of candidate)

\_\_\_\_\_ in the upcoming November 8, 2022, Consolidated  
(Elected office)

General Election.

By: \_\_\_\_\_  
(Printed Name of authorized representative)

Signature: \_\_\_\_\_  
(Signature of authorized representative)

Title: \_\_\_\_\_  
(Authorized officer of the organization)



## AUTHORIZATION OF ENDORSEMENT BY INDIVIDUAL

Date: 7/22/22

2022 AUG 10 PM 4:22

DEPARTMENT OF ELECTIONS

I, Scott Wiener wish to endorse (or support)

(Printed name of endorser)

JOAQUIN TORRES

(Name of candidate)

on their "Candidate Statement of Qualifications", for

the office of ASSESSOR-RECORDER in the upcoming November 8, 2022, Consolidated

(Elective office)

General Election.



Signature of endorser

## AUTHORIZATION OF ENDORSEMENT BY ORGANIZATION

USE ORGANIZATION'S LETTERHEAD

Date: \_\_\_\_\_

The \_\_\_\_\_ endorses (or supports)

(Printed name of endorser)

\_\_\_\_\_ on their candidate statement, for the office of

(Name of candidate)

\_\_\_\_\_ in the upcoming November 8, 2022, Consolidated

(Elective office)

General Election.

By: \_\_\_\_\_

(Printed Name of authorized representative)

Signature: \_\_\_\_\_

(Signature of authorized representative)

Title: \_\_\_\_\_

(Authorized officer of the organization)

AUTHORIZATION OF ENDORSEMENT BY INDIVIDUAL

SAN FRANCISCO  
FILED

Date: 7.22.22

2022 AUG 10 PM 4: 22

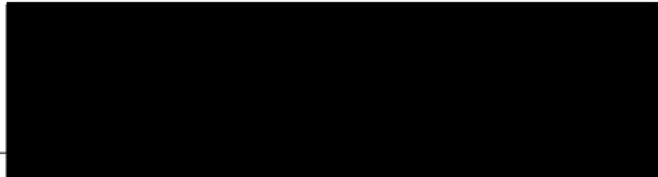
I, Phil Ting wish to endorse (or support)  
(Printed name of endorser)

DEPARTMENT OF ELECTIONS

JOAQUÍN TORRES on their "Candidate Statement of Qualifications", for  
(Name of candidate)

the office of Assessor-Recorder in the upcoming November 8, 2022, Consolidated  
(Elective office)

General Election.



Signature of endorser

AUTHORIZATION OF ENDORSEMENT BY ORGANIZATION

USE ORGANIZATION'S LETTERHEAD

Date: \_\_\_\_\_

The \_\_\_\_\_ endorses (or supports)  
(Printed name of endorser)

\_\_\_\_\_ on their candidate statement, for the office of  
(Name of candidate)

\_\_\_\_\_ in the upcoming November 8, 2022, Consolidated  
(Elective office)

General Election.

By: \_\_\_\_\_  
(Printed Name of authorized representative)

Signature: \_\_\_\_\_  
(Signature of authorized representative)

Title: \_\_\_\_\_  
(Authorized officer of the organization)

AUTHORIZATION OF ENDORSEMENT BY INDIVIDUALS

SAN FRANCISCO  
FILED

Date: 7/24/2022

2022 AUG 10 PM 4: 22

DEPARTMENT OF ELECTIONS

I, Shamann Walton wish to endorse (or support)

(Printed name of endorser)

JOAQUIN TORRES on their "Candidate Statement of Qualifications", for

(Name of candidate)

the office of ASSESSOR-RECORDER in the upcoming November 8, 2022, Consolidated

(Elective office)

General Election.



AUTHORIZATION OF ENDORSEMENT BY ORGANIZATION

USE ORGANIZATION'S LETTERHEAD

Date: \_\_\_\_\_

The \_\_\_\_\_ endorses (or supports)

(Printed name of endorser)

\_\_\_\_\_ on their candidate statement, for the office of

(Name of candidate)

\_\_\_\_\_ in the upcoming November 8, 2022, Consolidated

(Elective office)

General Election.

By: \_\_\_\_\_

(Printed Name of authorized representative)

Signature: \_\_\_\_\_

(Signature of authorized representative)

Title: \_\_\_\_\_

(Authorized officer of the organization)





# CITY AND COUNTY OF SAN FRANCISCO DEPARTMENT OF ELECTIONS

John Arntz, Director

Official Filing Form

## Candidate Statement of Qualifications

CAEC §§ 13307-13308

Candidate Name Joaquín Torres

Office Sought Assessor-Recorder

Election Date November 8, 2022

SAN FRANCISCO FILED 2022 AUG 10 PM 4:22 DEPARTMENT OF ELECTIONS	
Issued by: <u>SY</u>	Date: <u>7/10/22</u>

### 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 of Elections at [statements@sfgov.org](mailto:statements@sfgov.org).

Signature of Candidate \_\_\_\_\_ Date 10 August 2022

Name as it will appear on statement: Joaquín Torres

My occupation is Assessor-Recorder

My qualifications are:

Keep Text Within the Vertical Lines

Since my election I've worked hard to ensure the Assessor's office provides high-quality services residents and businesses depend on, and secure the financial resources that fund our city services.

To improve online access we're uploading 3.7 million additional records, expanding access to documents back to 1980.

To better serve the public, provide transparency, and reduce revenue at risk, our office has launched technology upgrades and a community portal for views into assessments.

Our transfer tax audit program ensures large corporations pay their fair share, recovering millions of dollars annually.

To strengthen financial resilience for low- and moderate-income communities, and monolingual and immigrant families, we've expanded online educational resources with the Family Wealth Series.

To help Black, brown, and AAPI communities harmed by historic zoning and lending discrimination, our office created an Estate Plan Program, providing 100 free to low-cost plans to underserved neighborhoods, helping residents build equity and assets for generations.

I ask for your vote to continue serving the people of San Francisco, ensuring quality customer service, and increased transparency, integrity, and equity.

I'm endorsed by:

Speaker Nancy Pelosi

U.S. Senator Dianne Feinstein

Governor Gavin Newsom

State Treasurer Fiona Ma

Mayor London Breed

Senator Scott Wiener

Assemblymember Phil Ting

Board of Supervisors President Shamann Walton

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