



CITY AND COUNTY OF SAN FRANCISCO DEPARTMENT OF ELECTIONS

John Arntz, Director

Official Filing Forms – Local Office

Please read the following carefully:

- You must file your declaration of candidacy on the same day as you file your declaration to accept or solicit campaign contributions. SF MEC § 201
- If you are a member of a City board, commission, or other body established by the San Francisco Charter, filing your declaration of candidacy may, with certain exceptions, result in forfeiture of your seat. S.F. Charter § 4.101.1

2025 DEC 11 PM 12:35

DEPARTMENT OF ELECTIONS

Issued by:

MAJL

Date:

12/11/25

Declaration of Intention to Solicit or Accept Contributions For Local Office

(CGCC § 1.122(a); SF MEC § 201)

I, ALBERT CHOW, hereby declare my intention to become a candidate for the office of

Print name of candidate

D4 SUPERVISOR of San Francisco at the forthcoming election to be held on 6/2/26.

Print name of candidate

Month, day, year

Candidate's signature

Date

Declaration of Candidacy

(CGCC § 1.122(a); CAEC §§ 13, 200, 8020, 8028(a), 8040, 8064; SF MEC § 201, 210)

I hereby declare myself a candidate for election to the office of District 4 Supervisor to be voted for at the Statewide Direct Primary Election to be held on June 2nd, 2026, and I declare the following to be true: my legal name, as given at birth or as established by marriage, common usage, or habit in all my affairs, or by decree of any court of competent jurisdiction is:

Print first name

ALBERT

M. I. Print last name

CHOW

Addresses

Home:

Number and street

City, State

ZIP Code

Mailing:

Number and street

City, State

ZIP Code

Telephone Number

Fax:

Email:

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

Executed on

Date

12/11 2025, in

City, State

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



CITY AND COUNTY OF SAN FRANCISCO
DEPARTMENT OF ELECTIONS

John Arntz, Director

Sworn Statement

- I meet the statutory and/or constitutional requirements for this office including, but not limited to, citizenship and residency.
- I understand that I may withdraw no later than 67 days before the election.
- If elected, I will qualify and accept the office of which I am a candidate and serve to the best of my ability.
- I am at present the incumbent of the following public office (if any): N/A

Candidate

Date

12/11/25

2025

Oath of Office

I, Albert Chen, do solemnly swear (or affirm) that I will support and defend the Constitution of the United States and the Constitution of the State of California against all enemies, foreign and domestic; that I will bear true faith and allegiance to the Constitution of the United States and the Constitution of the State of California; that I take this obligation freely, without any mental reservation or purpose of [redacted] well and faithfully discharge the duties upon which I am about to enter.

Candidate Signature

State of California

County of San Francisco ☐ SS.

Subscribed and sworn to before me on this 11th day of December, 2025.

Notary Public (or other official)

Examined and certified by [Signature] this 11th day of December, 2025

Deputy

For Department of Elections Use:

Date of original registration:

09/14/1992

Date of re-registration:

02/22/23

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

City Hall, Room 48, San Francisco, CA 94102

Espanol (415) 554-4300
Filipino (415) 554-4310



CITY AND COUNTY OF SAN FRANCISCO
DEPARTMENT OF ELECTIONS

John Arntz, Director

For the Ballot

(CAEC §§ 13104, 13106- 13107, 13211.7; SF MEC §§ 205, 225, 401)

Official Filing Form

25 JAN -6 PM 4:33

DEPARTMENT OF ELECTIONS

County Elections Official

By: _____
Date Issued: _____

Ballot
Information
Name and
ballot
designation to
appear on the
ballot

1

IMPORTANT NOTE: A ballot designation is optional. If one is requested, a completed **BALLOT DESIGNATION WORKSHEET** must be submitted. If no ballot designation is requested, write "NONE" and initial in the box. (Elections Code §§ 13107, 13107.3)

I request my name and ballot designation to appear on the ballot as follows:

ALBERT CHOW

Print Your Name for Use on the Ballot

Candidate initials box if NO
ballot designation is
preferred

HARDWARE STORE OWNER

Print Ballot Designation Requested

Name in
Chinese
Characters

2

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.

If a candidate has a character-based name by birth, that can be verified by birth certificate or other valid identification, the candidate may use that name on the ballot instead of a phonetic transliteration. A candidate who does not have a character-based name by birth, but who identifies by a particular character-based name and can demonstrate that the they have been known and identified within the public sphere by that name over the past two years, may use that name instead of a phonetic transliteration.

Check one option (provide supporting documentation):

☐ 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.

☐ I have a character-based name by birth and am providing supporting documentation of this name.

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



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Sina News



云南雨林探秘：西双版纳必打卡景点路线规划
必打卡景点集



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San Francisco's Chinatown introduces several new traffic signs in hopes of reducing the risk of car accidents.



China News Network
China News Network official account 2014.07.30 16:10

People are testing the newly installed traffic lights at an intersection.
(Photo by Chen Yunpu, World Journal)

According to a report by the World Journal, a US-based newspaper, Sunset Boulevard in San Francisco's Sunset District is a high-risk area with a relatively high probability of traffic accidents. This month, the San Francisco Municipal Transportation Agency (SMIDA) installed 11 traffic lights and 6 pedestrian crossing signals at the intersection of Sunset Boulevard and Yorba Street, totaling 17 traffic signals. Mayor Ed Lee, of Chinese descent, activated the system on July 28th to reduce the local accident rate.

^{Albert}
Zhou Shaoyun, a Chinese resident who has lived near the intersection of Sunset Boulevard and Yorba Street for 15 years, pointed out that he witnessed five fatal car accidents right in front of his house just two months after moving there in 1999. His Japanese wife, Reiko Matsueda, has witnessed four car accidents in seven years.

When Chu Chia-wen served as a city councilor for the Sunset District, he advocated for the installation of traffic lights at this intersection. Although Sunset Boulevard had north-south traffic flow, Yorba Street only had pedestrian crossings and no designated lanes for cars and motorcycles. Therefore, the transit authority did not install traffic lights at the time, but instead installed three flashing yellow lights to remind drivers to slow down, but this

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panning approximately one-quarter of a mile, previously lacked any traffic signals. Northbound drivers, accustomed to accelerating beneath the overpass, were prone to causing accidents.

Mayor Lee emphasized: "Sunset Boulevard is not a highway, and you should not drive on Sunset Boulevard as if you were on a highway."

Data from the San Francisco Municipal Transportation Agency (SMT) shows that the average number of traffic fatalities in San Francisco reaches 100 per year. SMT Commissioner Reese King pointed out that 34 pedestrians were killed while crossing the street last year, "but these accidents were preventable." Prevention methods include installing traffic lights and reducing speed. 6% of San Francisco's roads are involved in 60% of the most serious fatal traffic accidents, and Sunset Boulevard is one of them. Since 2012, the SMT has invested \$3.3 million to improve pedestrian safety on Sunset Boulevard.

Sunset District Councillor Katie Tang stated that the new traffic lights at the intersection of Sunset Boulevard and Yorba Street were originally scheduled for completion at the end of 2016. However, in February of this year, an elderly Chinese woman, Jenny Cheng, caused an accident at this intersection, resulting in one death and one serious injury. Therefore, the traffic lights were installed ahead of schedule in July of this year.

Katie Tang pointed out that traffic lights are expected to be installed at the intersections of Sunset Boulevard and Wawona Street and Moraga Street by the end of 2015, "hoping to achieve the vision of zero traffic fatalities within 10 years." (Chen Yunpu)

(Original title: New traffic signs launched in San Francisco's Chinatown to reduce the risk of traffic accidents)

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旧金山华埠启用多个交通新标识 冀降低车祸风险



中国新闻网

中国新闻网官方账号 2014.07.30 16:10

民众试行新安装红绿灯的路口。（美国《世界日报》/陈运璞 摄）

中新网7月30日电 据美国《世界日报》报道，旧金山日落区日落大道是高风险的路段之一，发生车祸机率相当高。本月份旧金山交通局在日落大道与Yorba街口，安装11个红绿灯与6个行人穿越街道号志，合计17个交通号志。华裔市长李孟贤于28日按钮启动，以降低当地的车祸机率。

住在日落大道与Yorba街口附近已有15年的华裔居民周绍鏐指出，他1999年搬来此地两个月后，就在家门口亲眼目睹车祸死亡案例，至今已有五起。



打开APP

eiko Matsu

eda)则在七年内看到四次车祸。

说说你的看法





California Secretary of State
BALLOT DESIGNATION WORKSHEET

June 2, 2026 Statewide Direct Primary Election (Elections Code §§ 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.**

Candidate
Information

1

Candidate Name:

ALBERT CHOW

Office:

Candidate Supervisor Del

Email:

[REDACTED]

Home Address:

[REDACTED] San Francisco, Ca. 94116

Mailing Address:

SAME

Business Address:

[REDACTED] San Francisco, Ca. 94116

Phone Number:

[REDACTED]

Business:

Home/Mobile:

[REDACTED]

Fax:

[REDACTED]

Attorney or
Other
Authorized
Person
Information

2

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

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.
- (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):

HARDWARE
Hardware Store Owner

Alternate Ballot Designation(s) 1:

Alternate Ballot Designation(s) 2:

If your proposed ballot designation is pursuant to Elections Code § 13107(a)(3):

The professions, vocations or occupations relied upon to support my proposed ballot designation(s) constitute my primary, main or leading professions, vocations or occupations. Initial fe

Translation of Proposed Designation: Gender specific translations will default to the masculine form for uniformity in translation unless you specify otherwise: ☒ Masculine () Feminine

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. (Note: It is not necessary to provide copies of Certificates of Election if you are currently a seated member for a voter-nominated office).
- (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.



California Secretary of State
BALLOT DESIGNATION WORKSHEET

June 2, 2026 Statewide Direct Primary Election (Elections Code §§ 13107, 13107.3, 13107.5; California Code of Regulations § 20711)

Page 2

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 am the owner of Street Well Hardware, 2nd generation of a family business, proprietor day to day operations.

Current or most recent job title: Owner/manager

Start Date: Nov/1985 End Date: Current

Employer Name or Business: Self

Person who can verify this information:

Name: Mariana Chow

Phone Number(s):

Email:

Justification for use of 2nd PVO:

Current or most recent job title:

Start Date:

End Date:

Employer Name or Business:

Person who can verify this information:

Name:

Phone Number(s):

Email:

Justification for use of 3rd PVO:

Current or most recent job title:

Start Date:

End Date:

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

If the [redacted] "yes," your proposed ballot designation is likely to be rejected.

X

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).



California Secretary of State
BALLOT DESIGNATION WORKSHEET

June 2, 2026 Statewide Direct Primary Election (Elections Code §§ 13107, 13107.3, 13107.5; California Code of Regulations § 20711)

Page 3

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

Justification for
Alternate Ballot
Designation(s) 1

A

Justification for use of 1st PVO:

Current or most recent job title:

Start Date:

End Date:

Employer Name or Business:

Person who can verify this information:

Name:

Phone Number(s):

Email:

Justification for use of 2nd PVO:

Current or most recent job title:

Start Date:

End Date:

Employer Name or Business:

Person who can verify this information:

Name:

Phone Number(s):

Email:

Justification for use of 3rd PVO:

Current or most recent job title:

Start Date:

End Date:

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 1st PVO:

Current or most recent job title:

Start Date:

End Date:

Employer Name or Business:

Person who can verify this information:

Name:

Phone Number(s):

Email:

Justification for use of 2nd PVO:

Current or most recent job title:

Start Date:

End Date:

Employer Name or Business:

Person who can verify this information:

Name:

Phone Number(s):

Email:

Justification for use of 3rd PVO:

Current or most recent job title:

Start Date:

End Date:

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

SAN FRANCISCO
FILED

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)

CITOW

ALBERT

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Division, Board, Department, District, If applicable

Your Position

Supervisor

District 4

► 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 SAN FRANCISCO

☒ City of SAN FRANCISCO

☐ Other

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

☐ Annual: The period covered is January 1, 2024, through
December 31, 2024.

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

-or-

The period covered is / / through
December 31, 2024.

☐ The period covered is January 1, 2024, 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 6/2/26 and office sought, if different than Part 1:

4. Schedule Summary (required)

► 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)

SAN FRANCISCO

CA

94116

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

Date Signed 1/6/26
(month, day, year)

Signature

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

NAME OF BUSINESS ENTITY

GREAT WALL HARDWARE

GENERAL DESCRIPTION OF THIS BUSINESS

RETAIL

FAIR MARKET VALUE

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☒ \$100,001 - \$1,000,000

☐ Over \$1,000,000

NATURE OF INVESTMENT

☐ Stock

☒ Other

FAMILY BUSINESS
(Describe)

☐ Partnership

☐ Income Received of \$0 - \$499

☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

1/24

ACQUIRED

1/24

DISPOSED

NAME OF BUSINESS ENTITY

GREAT WALL

GENERAL DESCRIPTION OF THIS BUSINESS

GENERAL CONSTRUCTION

FAIR MARKET VALUE

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☒ \$100,001 - \$1,000,000

☐ Over \$1,000,000

NATURE OF INVESTMENT

☐ Stock

☒ Other

Sole Proprietor
(Describe)

☐ Partnership

☐ Income Received of \$0 - \$499

☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

1/24

ACQUIRED

1/24

DISPOSED

NAME OF BUSINESS ENTITY

PFIZER

GENERAL DESCRIPTION OF THIS BUSINESS

Pharmaceutical

FAIR MARKET VALUE

☒ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock

☐ Other

(Describe)

☐ Partnership

☐ Income Received of \$0 - \$499

☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

5/25/25

ACQUIRED

1/24

DISPOSED

NAME OF BUSINESS ENTITY

Taiwan Semi Conductors

GENERAL DESCRIPTION OF THIS BUSINESS

Computer chips

FAIR MARKET VALUE

☐ \$2,000 - \$10,000

☒ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock

☐ Other

(Describe)

☐ Partnership

☐ Income Received of \$0 - \$499

☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

8/13/25

ACQUIRED

1/24

DISPOSED

NAME OF BUSINESS ENTITY

Netlix

GENERAL DESCRIPTION OF THIS BUSINESS

Media

FAIR MARKET VALUE

☐ \$2,000 - \$10,000

☒ \$10,001 - \$100,000

☒ \$100,001 - \$1,000,000

☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock

☐ Other

(Describe)

☐ Partnership

☐ Income Received of \$0 - \$499

☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

8/19/25

ACQUIRED

1/24

DISPOSED

NAME OF BUSINESS ENTITY

Nvidia

GENERAL DESCRIPTION OF THIS BUSINESS

AI Platform Technology

FAIR MARKET VALUE

☐ \$2,000 - \$10,000

☒ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock

☐ Other

(Describe)

☐ Partnership

☐ Income Received of \$0 - \$499

☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

10/29/25

ACQUIRED

1/24

DISPOSED

Comments:

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 _____

1. BUSINESS ENTITY OR TRUST	
Name <u>Great Wall Hardware</u>	
Address (Business Address Acceptable) <u>1821 Jaramel St., San Francisco, Ca. 94116</u>	
Check one <input type="checkbox"/> Trust, go to 2 <input checked="" type="checkbox"/> Business Entity, complete the box, then go to 2	
GENERAL DESCRIPTION OF THIS BUSINESS <u>Retail Store</u>	
FAIR MARKET VALUE <input type="checkbox"/> \$0 - \$1,999 <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input checked="" type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	IF APPLICABLE, LIST DATE: _____/_____/24 ACQUIRED _____/_____/24 DISPOSED
NATURE OF INVESTMENT <input checked="" type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Other	
YOUR BUSINESS POSITION <u>Family business partner</u>	

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	
<input type="checkbox"/> \$0 - \$499 <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000	<input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)	
<input checked="" type="checkbox"/> None or <input type="checkbox"/> Names listed below	

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	
Check one box: <input type="checkbox"/> INVESTMENT <input type="checkbox"/> REAL PROPERTY	
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property _____	
Description of Business Activity or City or Other Precise Location of Real Property _____	
FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	IF APPLICABLE, LIST DATE: _____/_____/24 ACQUIRED _____/_____/24 DISPOSED
NATURE OF INTEREST <input type="checkbox"/> Property Ownership/Deed of Trust <input type="checkbox"/> Stock <input type="checkbox"/> Partnership	
<input type="checkbox"/> Leasehold _____ Yrs. remaining <input type="checkbox"/> Other _____	
<input type="checkbox"/> Check box if additional schedules reporting investments or real property are attached	

Comments: _____

1. BUSINESS ENTITY OR TRUST	
Name <u>Great Wall</u>	
Address (Business Address Acceptable) <u>1821 Jaramel St. San Francisco Ca. 94116</u>	
Check one <input type="checkbox"/> Trust, go to 2 <input checked="" type="checkbox"/> Business Entity, complete the box, then go to 2	
GENERAL DESCRIPTION OF THIS BUSINESS	
FAIR MARKET VALUE <input type="checkbox"/> \$0 - \$1,999 <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input checked="" type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	IF APPLICABLE, LIST DATE: _____/_____/24 ACQUIRED _____/_____/24 DISPOSED
NATURE OF INVESTMENT <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Other	
YOUR BUSINESS POSITION <u>Owner</u>	

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	
<input type="checkbox"/> \$0 - \$499 <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000	<input type="checkbox"/> \$10,001 - \$100,000 <input checked="" type="checkbox"/> OVER \$100,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)	
<input type="checkbox"/> None or <input type="checkbox"/> Names listed below	

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	
Check one box: <input type="checkbox"/> INVESTMENT <input type="checkbox"/> REAL PROPERTY	
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property _____	
Description of Business Activity or City or Other Precise Location of Real Property _____	
FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	IF APPLICABLE, LIST DATE: _____/_____/24 ACQUIRED _____/_____/24 DISPOSED
NATURE OF INTEREST <input type="checkbox"/> Property Ownership/Deed of Trust <input type="checkbox"/> Stock <input type="checkbox"/> Partnership	
<input type="checkbox"/> Leasehold _____ Yrs. remaining <input type="checkbox"/> Other _____	
<input type="checkbox"/> Check box if additional schedules reporting investments or real property are attached	

SCHEDULE B
Interests in Real Property
(Including Rental Income)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name _____

STREET ADDRESS
[REDACTED]

CITY
SAN FRANCISCO Ca. 94116

FAIR MARKET VALUE: ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☒ Over \$1,000,000

IF APPLICABLE, LIST DATE:
ACQUIRED 1/24 DISPOSED 1/24

NATURE OF INTEREST
☒ Ownership/Deed of Trust ☐ Easement
☐ Leasehold _____ Yrs. remaining _____ Other _____

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$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.
☐ None

STREET ADDRESS
[REDACTED]

CITY
SAN FRANCISCO Ca. 94116

FAIR MARKET VALUE: ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☒ Over \$1,000,000

IF APPLICABLE, LIST DATE:
ACQUIRED 1/24 DISPOSED 1/24

NATURE OF INTEREST
☒ Ownership/Deed of Trust ☐ Easement
☐ Leasehold _____ Yrs. remaining _____ Other _____

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$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.
☐ None

* You are not required to report loans from a commercial lending institution made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER* _____

ADDRESS (Business Address Acceptable) _____

BUSINESS ACTIVITY, IF ANY, OF LENDER _____

INTEREST RATE _____% ☐ None TERM (Months/Years) _____

HIGHEST BALANCE DURING REPORTING PERIOD
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

NAME OF LENDER* _____

ADDRESS (Business Address Acceptable) _____

BUSINESS ACTIVITY, IF ANY, OF LENDER _____

INTEREST RATE _____% ☐ None TERM (Months/Years) _____

HIGHEST BALANCE DURING REPORTING PERIOD
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

Comments: _____

SCHEDULE C
Income, Loans, & Business
Positions
(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name _____

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

Great Wall

ADDRESS (Business Address Acceptable)

1821 Jaramal St.

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Construction

YOUR BUSINESS POSITION

Owner

GROSS INCOME RECEIVED ☐ No Income - Business Position Only
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☒ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income
(For self-employed use Schedule A-2.)

☐ Partnership (Less than 10% ownership. For 10% or greater use
Schedule A-2.)

☐ Sale of _____
(Real property, car, boat, etc.)

☐ Loan repayment

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☒ Other Derived from sales, retail
(Describe)

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED ☐ No Income - Business Position Only
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income
(For self-employed use Schedule A-2.)

☐ Partnership (Less than 10% ownership. For 10% or greater use
Schedule A-2.)

☐ Sale of _____
(Real property, car, boat, etc.)

☐ Loan repayment

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

► **2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

* You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000
☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000
☐ OVER \$100,000

INTEREST RATE

_____% ☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None ☐ Personal residence

☐ Real Property _____
Street address

_____ City

☐ Guarantor _____

☐ Other _____
(Describe)

Comments: _____



CITY AND COUNTY OF SAN FRANCISCO
DEPARTMENT OF ELECTIONS

John Arntz, Director

Candidate Statement of Qualifications

(CAEC §§ 13307-13308)

June 2, 2026, Statewide Direct Primary Election – Board of Supervisors

Official Filing Form

2025 JAN -6 PM 4:33

DEPARTMENT OF ELECTIONS

County Elections Official

By: _____

Date Issued: _____

Candidate Name: ALBERT CHOW

Office Sought: SUPERVISOR DISTRICT 4

Please complete the following sections:

☐ I will NOT file a Candidate Statement of Qualifications

☒ I will file a Candidate Statement of Qualifications

☐ I will send an electronic statement in Word format to the Department at publications@sfgov.org no later than 5:00 PM on the working day after the close of the nomination period.

Signature of Candidate: _____ Date 1/6/26

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

3 Name as it will appear with statement: ALBERT CHOW

My occupation is: HARDWARE STORE OWNER

My qualifications are:

Keep Text Within the Vertical Lines. Word count starts here:

I'm a 50 year Sunset resident, raising my children and sending them to the same neighborhood public schools I attended.

I co-founded People of the Parkside Sunset to strengthen our neighborhood by hosting community meetings to keep residents informed, supporting merchants and creating beloved community events like outdoor movie nights.

I led the battles to keep the Great Highway Compromise and recall Supervisor Joel Engardio when he didn't listen to us. I've always been on the side of Sunset voters.

Recently, Great Wall Hardware – established by my parents in 1983 – was burned down by an arsonist. I've spent the last two years rebuilding my family's legacy. Like my store, our district is damaged and divided. I'll build it back up and bring everyone together.

As your Supervisor, I'll fight to:

- Fully staff our Police Department to keep us safe.
- Create needed housing without displacing working class residents and families.
- Help start and grow small businesses while supporting our local establishments.
- Fight to restore the Great Highway compromise.
- Support local schools to ensure our next generation gets the education they deserve.
- Add needed infrastructure like emergency services, parking and traffic safety measures.

Endorsers:

- The Chinese American Democratic Club
- Richard Corriea, SFPD Commander (ret.)
- Peter Walsh, SFPD Commander (ret.)
- Liam Reidy, President United Irish Cultural Center
- Wei Rapaport, Owner Qiao Ji Mandarin Language School

www.albertchowsf.com



General Instructions – Candidate Statement

1. Submission Deadline

Candidate statement must be submitted to the Department of Elections no later than 5 p.m., Tuesday, January 6, 2026. If a Candidate does not file a Candidate Statement with the Department of Elections by that time, the candidate's statement will not appear in the Voter Information Pamphlet. On Wednesday, January 7, 2026, the Department of Elections will allow Candidates to review and correct typeset Statements.

Candidates are strongly encouraged to submit an electronic copy with the signed and dated hard copy of their statement (Microsoft Word format preferred). Where a discrepancy exists between the hard copy and electronic copy, the hard copy will be relied upon for all purposes.

The statements filed shall remain confidential until the expiration of the filing deadline. (CAEC §13311)

2. Statements are printed as submitted, no changes or corrections after the filing deadline

Type or print your statement neatly. Proofread your statement carefully before submitting it. Statements will be printed as submitted. You may not make changes or corrections after the deadline for filing. Errors in spelling, punctuation, grammar, or intent will not be corrected by any official agency.

Nothing in this section shall be deemed to make any statement or the authors thereof free from any civil or criminal action or penalty because of any false, slanderous, or libelous statement offered for printing or contained in the Voter Information Pamphlet.

Any candidate who knowingly makes a false statement of a material fact in a Candidate's Statement, with the intent to mislead the voters in connection with their campaign for nomination or election to a nonpartisan office, is punishable by a fine not to exceed one thousand dollars (\$1,000).

General
Instructions

4 3. Word Count (CAEC §§9, 13307)

- i. Candidate statement is limited to a maximum of 200 words
- ii. The 200-word count begins after the preprinted introduction: "My qualifications are:"
- iii. "San Francisco" and other proper nouns count as one word. Each name, including middle initial, will count as a word.
- iv. If you include the names of nominators or supporters, the names and any identification will be counted towards the 200-word limit. If you include names of people for whom you have not submitted a Nomination Paper, you must include letters of endorsement from these individuals with original signatures.
- v. The statement of each candidate will be printed in type of uniform size and darkness, and with uniform spacing. Bold, italic, and underlined text will not be used.

4. Restrictions (CAEC §13307, 18351) Your statement shall not include any of the following:

- i. Your party affiliation
- ii. Membership activity in partisan political organizations
- iii. Reference to other candidates for office or to another your qualifications

5. Candidate Statement Review Period

- i. On Wednesday, January 7, 2026, Candidates will be permitted to review and correct typeset statements.
- ii. Beginning noon on Wednesday, January 7, 2026, the public may review submitted candidate statements. This period ends Tuesday, January 20, 2026 at noon.

SAN FRANCISCO
FILED

2025 JAN -6 PM 4:33

DEPARTMENT OF THE CLERK



Date: 1/5/26

The Chinese American Democratic Club endorse Albert Chow on their "Candidate Statement of Qualifications" in the upcoming June 2, 2026, Statewide Direct Primary Election.

By: Josephine Zhao
(Printed name of authorized representative)

Title: President, Chinese American Democratic Club
(Authorized officer of the organization)

Signature: [REDACTED]
(Signature of authorized representative)

AUTHORIZATION OF ENDORSEMENT

I, RICHARD L. CORRIEA, endorse Albert Chow for the office of District 4 Supervisor in the June 2nd, 2026 Election, and hereby authorize the use of my name on her "Candidate Qualification Statements" and campaign materials.

Name: RICHARD L. CORRIEA

Title: COMMANDER, SFPD (RET.)

Signature

A black rectangular box redacting the signature of Richard L. Corriea.

Date

1-6-2026

AUTHORIZATION OF ENDORSEMENT

I, PETER D WALSH, endorse Albert Chow for the office of District 4 Supervisor in the June 2nd, 2026 Election, and hereby authorize the use of my name on her "Candidate Qualification Statements" and campaign materials.

Name: PETER D WALSH

Title: SFPD Commander, retired

Signature

Date


1-5-26

AUTHORIZATION OF ENDORSEMENT

I, Liam Reilly, endorse Albert Chow for the office of District 4 Supervisor in the June 2nd, 2026 Election, and hereby authorize the use of my name on her "Candidate Qualification Statements" and campaign materials.

Name: Liam Reilly

Title: Executive Director UICC (Irish Center)

Signature:  Date: 1/6/2026

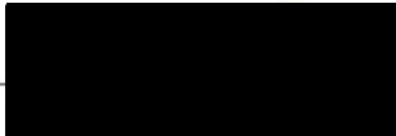
AUTHORIZATION OF ENDORSEMENT

I, 2, Wei Rapoport, endorse Albert Chow for the office of District 4 Supervisor in the June 2nd, 2026 Election, and hereby authorize the use of my name on her "Candidate Qualification Statements" and campaign materials.

Name: Wei Rapoport

Title: Owner of Qiao Ji Mandarin Language School
Owner of Funky Beans

Signature



Date

1/6/26