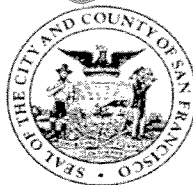


San Francisco Ethics Commission  
25 Van Ness Avenue, Suite 220  
San Francisco, CA 94102  
Phone: (415) 252-3100  
Fax: (415) 252-3112  
Email: ethics.commission@sfgov.org  
Web: www.sfgov.org/ethics

ORIGINAL



FILED  
06 DEC 14 PM 4:25  
SAN FRANCISCO  
ETHICS COMMISSION

**Report of Payments Made at the Behest of an Elected Officer**  
**San Francisco Ethics Commission**  
(Govt. Code § 82015(b)(2)(B)(iii))

BY \_\_\_\_\_

In accordance with the California Government Code § 82015, payments made at the behest<sup>4</sup> of elected officials are presumed not to be contributions if they meet the following guidelines:

- payments are made principally for legislative, governmental, or charitable purposes,
- payments are made principally for purposes unrelated to the official's candidacy for elected office,
- payments are not made principally for the candidate's personal purposes.

Although such payments are not contributions, they MUST BE REPORTED within 30 days after the total payments made by a single source equal to or exceed \$5,000 in a calendar year.

Once the \$5,000 threshold is met, all subsequent payments by the same source during the calendar year must be disclosed within 30 days after the payment is made.

Elected Officer Information:	
Name of Officeholder: <u>Bevan Dufty</u>	Address: <u>City Hall, Room 272</u>
Office Held: <u>Member, S.F. Board of Supervisors</u>	City: <u>S.F. CA 94102</u>
Period Covered by the Report: from: <u>10/4/06</u> to: <u>12/14/06</u>	State: <u>CA</u>
Jurisdiction: <u>City and County of San Francisco</u>	Zip: <u>94102</u>
	Telephone: <u>(415) 595-3213</u>

Title: Member, Board of Supervisors

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

Date: 12/14/06

<sup>4</sup>"Made at the behest of" means "made under the control or at the direction of, in cooperation, consultation, coordination, or concert with, at the request or suggestion of, or with the express, prior consent of." Cal. Code Regs, § 18225.7.

Name and Address of Payor (Contributor)	Date(s) of Payment	Amount of Payment	Cumulative Amount (Calendar Year)	Name and Address of Payee	Description of Goods or Services Provided or Purchased	Description of Purpose or Event for Which Payment Was Made.
Wells Fargo Bank	11/06	\$10,000	\$10,000	Athletic Student Achievement Program (ASAP) Mission High School	support for summer program	fundraising for summer 107 scholarships

This form must be filed with the San Francisco Ethics Commission, 25 Van Ness Avenue, Suite 220, San Francisco, CA 94102.

Please attach additional pages as necessary.

Additional pages are attached

BY \_\_\_\_\_  
 SAN FRANCISCO  
 ETHICS COMMISSION  
 06 DEC 14 PM 4:25  
 FILED