Form SFEC-3.216(d) Cover Page

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SAN FRANCISCO ETHICS COMMISSION

Please type or print legibly in ink.

Trease type or print region, in this	BY metabolication of the majorate property and the contract of	
1. Information regarding Elected Officer:		
Name (Last) (First)	(Middle) Daytime Telephone	
Wiener, Scott	D. (415) 554-6968	
Mailing Address Street	Zip Fax Telephone	
City Hall Room 274, SF ()		
Office Held	Email Address	
Supervisor	Scott. Wiener @sfgov.	
2. Purpose of Travel:	4. Schedule Summary:	
Study tour of Israel organized by the Son Francisco	Total number of pages, including this cover page	
Israel organized by	Check applicable schedules:	
the Son Francisco	Schedule A Yes – schedule attached	
Jewish Community	Gift of transportation, lodging or subsistence	
,	Schedule B	
	Gift to the City of transportation, lodging or subsistence	
3. Dates of Travel and Itinerary:	Schedule C Yes – schedule attached	
alido SC-Ind	Reimbursement to the City of gift of transportation,	
3/15/12 SF-Israel Month/Day/Year City, State, Country	lodging or subsistence	
3/16-3/21/12 Jerusalem,		
	5. Verification: I have used all reasonable diligence in preparing this	
3/21-3/23/12 Haifa, Upper Galike, AKKO	statement. I have reviewed this statement and to the	
3/23-3/24/12 - Tel Aviv	best of my knowledge, the information contained	
	herein and in any attached schedules is true and complete.	
3/25/12- Isroel-SF	·	
	I certify under penalty of perjury under the laws	
	of the State of California that the foregoing is true and correct.	
	$\frac{1}{2}$	
	Date signed	
	Signature	

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Form SFEC-3.216(d) Schedule A – Gifts of Travellics COMMISSION

	BY
1. Information regarding entity funding gift of transportation, lodging or subsistence	3. Cost of transportation, lodging or subsistence
Full Name of Entity: Tewish Community Relations Council	A. Please list the total amount of costs that will be paid by the entity to fund the elected
121 Steuart St., #301 Address:	officer's travel, including but not limited to the amount directly related to the cost of the officer's transportation, lodging and
SFCA 94105 Street City State Zip	subsistence. \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Name of Contact Person:	B. Please list the amount in Item A that is directly related to the cost of the officer's
Abby Porth Email Address: Telephone:	transportation, lodging and subsistence.
aporth@jcrc.org	
2. Information regarding contributors who contributed more than \$500 to the entity to fund the trip Please list the name, occupation and employer of any	4. Information regarding persons accompanying the elected officer Please list the name of any individual who is
contributor who contributed more than \$500 to the entity funding the trip and whose contributions were used in whole or in part to fund the trip:	 (a) a City employee required to file a Statement of Economic Interests, (b) a lobbyist or campaign consultant registered
Richard + Rhoda Goldman Ford	with the Ethics Commission; (c) an employee of or individual who has an ownership interest in a lobbyist or campaign consultant registered with the Ethics
Occupation of Contributor	Commission; or (d) an employee or officer of the entity that will
Employer of Contributor SCOTT Wiener for Sufervisor Name of Contributor	pay for the gift of transportation, lodging or subsistence, and who is accompanying the elected officer on the trip.
Occupation of Contributor	Please identify whether the individual is category (a), (b), (c), or (d), as described above.
Employer of Contributor	Name of Individual Category
Name of Contributor	
Occupation of Contributor	
Employer of Contributor	
☐ Check box if additional schedules are attached.	Check box if additional schedules are attached.