

FILED

Form SFEC-3.216(d)
Cover Page

2012 NOV 15 AM 11:44

SAN FRANCISCO
ETHICS COMMISSION

Please type or print legibly in ink.

BY _____

| | | | |
|---|---------|----------------------|-------------------|
| 1. Information regarding Elected Officer: | | | |
| Name (Last) | (First) | (Middle) | Daytime Telephone |
| Chiu | David | S. | (415) 554-7450 |
| Mailing Address | Street | Zip | Fax Telephone |
| 1 Dr. Carlton Goodlett Place, Rm 264, San Francisco, CA 94102 | | | (415) 554-7454 |
| Office Held | | Email Address | |
| President, San Francisco Board of Supervisors | | david.chiu@sfgov.org | |

2. Purpose of Travel:
 Representing San Francisco at
 Founding Meeting of the National
 Progressive Municipal Network

4. Schedule Summary:
 Total number of pages, including this
 cover page 2

Check applicable schedules:

Schedule A **Yes – schedule attached**
Gift of transportation, lodging or subsistence

Schedule B **Yes – schedule attached**
*Gift to the City of transportation, lodging or
 subsistence*

Schedule C **Yes – schedule attached**
*Reimbursement to the City of gift of transportation,
 lodging or subsistence*

3. Dates of Travel and Itinerary:


11/16/12 Arrive Washington DC
 Month/Day/Year City, State, Country

11/18/12 Depart Washington DC

5. Verification:
 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 certify under penalty of perjury under the laws
 of the State of California that the foregoing is true
 and correct.**

Date signed 11/15/12

Signature 

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

1. Information regarding entity funding gift of transportation, lodging or subsistence

Full Name of Entity:
National Progressive Municipal Network, c/o Make the Road New York

Address:
301 Grove Street Brooklyn NY 11237
Street City State Zip

Name of Contact Person:
Nicole Oddo

Email Address: Telephone:
Nicole.Oddo@maketheroadny.org (718) 565-8500

3. Cost of transportation, lodging or subsistence

A. Please list the total amount of costs that will be paid by the entity to fund the elected officer's travel, including but not limited to the amount directly related to the cost of the officer's transportation, lodging and subsistence.
\$707.60

B. Please list the amount in Item A that is directly related to the cost of the officer's transportation, lodging and subsistence.
\$707.60

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 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:

Name of Contributor _____
Occupation of Contributor _____
Employer of Contributor _____

Name of Contributor _____
Occupation of Contributor _____
Employer of Contributor _____

Name of Contributor _____
Occupation of Contributor _____
Employer of Contributor _____

Check box if additional schedules are attached.

4. Information regarding persons accompanying the elected officer

Please list the name of any individual who is

- (a) a City employee required to file a Statement of Economic Interests,
- (b) a lobbyist or campaign consultant registered 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 Commission; or
- (d) an employee or officer of the entity that will pay for the gift of transportation, lodging or subsistence, and

who is accompanying the elected officer on the trip.

Please identify whether the individual is category (a), (b), (c), or (d), as described above.

Name of Individual Category
Supervisor John Avalos (a)

Check box if additional schedules are attached.