Form SFEC-3.216(d) Cover Page

2013 JUH 28 PH 4: 11

ZTEKOS COMMISSION

Please type or print legibly in ink.

,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					Part of the second seco	
1. Information regarding Elected Officer:						
Name (Last)	(First)		(Middle)	Daytime	Telephone	
AVALOS	JOHN	MICHAEL		415) 554-6975	
Mailing Address	Street		Zip	Fax Tele	phone	
1 CARLTON B. GOODLETT PLACE, SF, CA			94102 (415) 554-6979			
Office Held			Email Address			
SAN FRANCISCO BOARD OF SUPERVISORS, DISTRIC			JOHN.AVALOS@SFGOV.ORG			
2. Purpose of Travel: Meet with Seattle Councilmembers and local community / labor coalition regarding San Francisco's Local Hiring legislation.			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			
07/01/13 SF Month/Day/Year	to Seattle City, State, Country to Seattle	-		ent to the Ci	schedule attached ty of gift of transportation,	
		-	I have used a statement. I best of my kr herein and in complete. I certify und of the State and correct.	have review nowledge, the any attache er penalty of Californi	e diligence in preparing this ed this statement and to the he information contained d schedules is true and hof perjury under the laws hat the foregoing is true	
***************************************		-	Date signed	06/28/13		
	1	-	Signature _			

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

1. Information regarding entity funding gift of transportation, lodging or subsistence	3. Cost of transportation, lodging or subsistence			
Full Name of Entity:	A. Please list the total amount of costs that will be paid by the entity to fund the elected			
Brightline Defense Project	officer's travel, including but not limited to the amount directly related to the cost of the			
Address:	officer's transportation, lodging and subsistence.			
SF CA 94103 Street City State Zip	\$1,268.68			
Name of Contact Person: Josh Arce	B. Please list the amount in Item A that is directly related to the cost of the officer's transportation, lodging and subsistence.			
Email Address: Telephone:	\$827.88			
(415) 860-2150				
(410)660 2160	Removed and a second se			
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	 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; 			
entity funding the trip and whose contributions were used in whole or in part to fund the trip:				
Name of Contributor	(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	pay for the gift of transportation, lodging or subsistence, and			
Name of Contributor	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	Rachel Redondiez (a)			
Occupation of Contributor	(d)			
Employer of Contributor				
Check box if additional schedules are attached.				