

FILED

2013 DEC 17 AM 8:57

AMENDED*

Emailed to SFEC on 12/16/13

SAN FRANCISCO ETHICS COMMISSION

Form SFEC-3.216(d)

Cover Page

Received via email on 12-16-2013
Please type or print legibly in ink

1. Information regarding Elected Officer:

Name (Last)	(First)	(Middle)	Daytime Telephone
Cisneros	José	Miguel	(415) 554-4479
Mailing Address	Street	Zip	Fax Telephone
1 Dr. Carlton B. Goodlett Place, Room 140		94102	(415) 554-5507
Office Held	Email Address		
Treasurer	jose.cisneros@sfgov.org		

2. Purpose of Travel:

National League of Cities' annual congress and expo.

4. Schedule Summary:

Total number of pages, including this cover page 8

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:


11/13/13	SF, CA to Seattle, WA
Month/Day/Year	City, State, Country
11/15/13	Seattle, WA to SF, CA

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 12/16/13

Signature 

2010 DEC 17 AM 8:21
 ETHICS COMMISSION
 SAN FRANCISCO

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:
 League of California Cities

Address:

 Sacramento CA 95814
Street City State Zip

Name of Contact Person:
 Mimi Sharpe

Email Address: Telephone:
 mshapre@cacities.org (916) 658-8232

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.

\$669.30

AMENDED*

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

\$669.30

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
_____	_____
_____	_____

Check box if additional schedules are attached.

*AMENDED filing; original ESTIMATED filing attached.



RECEIPT

From: Hotel
To: SEA-TAC AIRPORT
Date: 11-15-13 Contract Rate: _____ Amount: \$ 50.00
Pickup Time: _____ Drop Time: _____
FHL#: _____
Cab#: _____ Driver: _____

Yellow Cab

206-622-6500
Seattle

425-455-4999
Eastside

253-455-4999
So. King County

DATE 11-13-13 TIME _____ DRIVER'S NAME _____
RECEIVED FROM _____ CAB# _____
AMOUNT \$ 50.00 FOR HIRE# _____
FROM SEA-TAC AIRPORT
TO SARATON HOTEL

24 HOUR COMPUTER DISPATCH/CORPORATE ACCOUNTS WELCOME - 206-343-4362



Sheraton
HOTELS & RESORTS

Cisneros, Jose	Page Number	1	Invoice Nbr	1000273961
Ibm/global/gp	Guest Number	3145337	Arrive Date	11-13-2013 09:19
[REDACTED]	Folio ID	A	Depart Date	11-14-2013 17:54
San Francisco, CA	No. Of Guest	2	Agent	ROSELCOR
94117-4113	Room Number	3404		
	Time	11-14-2013 18:00		

Invoice

Date	Reference	Description	Charges	Credits
11-13-2013	RT3404	Room Chrg Corp Volumn LRA	\$133.00	
11-13-2013	RT3404	Room Tax	\$20.75	
11-13-2013	RT3404	Seattle Tourism Assessment	\$2.00	
11-14-2013	AX	American Express		\$-155.75
		** Total	\$155.75	\$-155.75
		** Balance	\$0.00	

For Authorization Purpose Only

J CISNEROS

Date	Credit Card	Code	Authorized
11-13-2013	XXXX1008	581612	192.85

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Sweet Dreams? Experience Sheraton hotels at home with Sweet Sleeper. Welcome restful nights with the same signature mattress, down hypoallergenic pillows and luxurious sheets you slept in last night. Order your Sweet Sleeper Bed at www.sheraton.com/store

W Seattle

Seattle, WA 98101

206-264-6000

http://www.starwood.com/



HOTELS

Cisneros, Jose	Page Number	1	Invoice Mbr	1000085821
[REDACTED]	Guest Number	688066	Arrive Date	11-14-2013 16:28
San Francisco, CA	Folio ID	A	Depart Date	11-15-2013 06:01
94117-4113				
	No. Of Guest	2	Agent	SUBAKAT
	Room Number	2609		
	Time	11-15-2013 06:10		

Invoice

Date	Reference	Description	Charges	Credits
11-14-2013	RT2609	Room Charge	\$137.00	
11-14-2013	RT2609	State Tax	\$11.78	
11-14-2013	RT2609	Seattle Tourism Assessment	\$2.00	
11-14-2013	RT2609	Occupancy/Tourism	\$9.59	
11-15-2013	AX	American Express		\$-160.37
		** Total	\$160.37	\$-160.37
		** Balance	\$0.00	

For Authorization Purpose Only

J CISNEROS

Date	Credit Card	Code	Authorized
11-14-2013	XXXX1008	506812	198.65

Your SPG Account P400019787 earned at least 411 Starpoints. Get 10,000 more with the SPG Credit Card. spg.com/axpcard

Thank you for choosing Starwood Hotels We look forward to welcoming you back soon!

Tell us about your stay. www.whothels.com/reviews provided, the entirety of which is retained by the hotel.

Jose Cisneros <[REDACTED]>

united.com reservation for Seattle, WA (SEA)

1 message

United Airlines, Inc. <unitedairlines@united.com>

Thu, Oct 10, 2013 at 1:57 PM

To: [REDACTED]

Thu., Oct 10, 2013

united.com | Deals & Offers | Reservations | Earn MileagePlus® Miles | My Account

Thank you for choosing United Airlines.



We are processing your reservation and will send you a confirmation email once this is completed. This process usually takes less than an hour; however, in rare cases it could take longer. Your reservation will remain confirmed during the processing period, and it's not necessary to contact us unless you are traveling within 24 hours.

As a reminder, you can [REDACTED] at [REDACTED], including:

- Purchasing additional products and services to improve your travel experience
- Viewing or changing seat assignments
- Changing your flight
- Checking-in (within 24 hours)
- Booking a car or hotel
- Printing additional receipts, and more

If you do not receive your receipt within three hours,

FLIGHT SUMMARY Confirmation Number: [REDACTED]

→ **Wed., Nov. 13, 2013** | San Francisco, CA (SFO) to Seattle, WA (SEA)

← **Fri., Nov. 15, 2013** | Seattle, WA (SEA) to San Francisco, CA (SFO)

[View full trip details, seat assignments and printable receipts.](#)



Mr. Jose Miguel Cisneros

Seats: SFO - SEA: 7C
SEA - SFO: 8C



Seattle Hotels

STARTING AT

PER DAY

Book now



Travel Price Details



1 Adults (age 18 to 64) **\$156.00**
Additional Taxes/Fees **\$21.80**

Book with our preferred car partners

- Save up to 35% off
- Earn 75 reward miles/day
- Earn 150 bonus reward miles when booking on

Total Fare

▪ Choose or

Total Fare: \$177.80/NA21QN/NA21QN

- [View current baggage acceptance allowances.](#)
- [Download a complete travel guide.](#)

Important Baggage Information

Carry-on baggage allowed

United accepts the following items, per customer to be carried on the aircraft at no charge:

- One carry-on bag no more than 45 linear inches or 114 linear centimeters (L + W + H) or 14 inches x 9 inches x 22 inches (23 x 35 x 56 cm)
- One personal item (such as a shoulder or laptop bag).

Checking bags for this itinerary

Checked baggage service charges are collected at any point in the itinerary where bags are checked. The bag service charges below reflect a maximum outside linear dimension of 62 linear inches (157 cm)

First and second baggage service charges per traveler as listed below:	1st bag	2nd bag	Weight per bag
Wed., Nov. 13, 2013	\$25 \$0*	\$35 \$0*	70.0 lbs (32 kgs)

San Francisco, CA (SFO) to Seattle, WA (SEA)

Fri., Nov. 15, 2013

\$25 \$0*

\$35 \$0*

70.0 lbs (32 kgs)

Seattle, WA (SEA) to San Francisco, CA (SFO)



Earn Double Miles

Earn 2 award miles per dollar spent on tickets purchased from United and 1.5 miles per dollar everywhere else when you use your MileagePlus Club Card.

[Learn more](#)

Baggage check-in must occur with United or United Express, and you must have valid MileagePlus Premier® Gold membership at time of check-in to qualify for waiver of service charges for up to three checked bags (within specified size and weight limits).

First and second bag service charges do not apply to active-duty members of the U.S. military and their accompanying dependents. For additional information regarding baggage charges, allowances, weight/size restrictions, exceptions or embargoes, or charges for overweight, oversized, excess, odd-sized baggage, special items or sporting equipment, visit [http://www.united.com/baggage](#)

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[View our strategy of view](#)

A STAR ALLIANCE MEMBER

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If you are experiencing technical issues, please contact [Support via](#) or

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P.O. Box 5120 Rapid City, SD
57709-5120 USA

ESTIMATE*

Emailed to SPEC
on 11/5/13

Form SFEC-3.216(d)
Cover Page

Please type or print legibly in ink

1. Information regarding Elected Officer:			
Name (Last)	(First)	(Middle)	Daytime Telephone
Cisneros	José	Miguel	(415) 554-4479
Mailing Address	Street	Zip	Fax Telephone
1 Dr. Carlton B. Goodlett Place, Room 140		94102	(415) 554-5507
Office Held	Email Address		
Treasurer	jose.cisneros@sfgov.org		

2. Purpose of Travel:
National League of Cities' annual congress and expo.

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

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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

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11/13/13 SF, CA to Seattle, WA
Month/Day/Year City, State, Country

11/15/13 Seattle, WA to SF, CA

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 11/05/13

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:
 League of California Cities

Address:

 _____ Sacramento CA 95814
Street City State Zip

Name of Contact Person:
 Mimi Sharpe

Email Address: Telephone:
 msharpe@cacities.org (916) 658-8232

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.

\$800.00

ESTIMATE*

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

\$800.00

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

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Please list the name of any individual who is

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- (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

Check box if additional schedules are attached.

*ESTIMATED expenses; amended report to be submitted upon return.