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2009 MAY -4 PM 2: 27

Form SFEC-3.216(d)
Cover Page

 ORIGINAL


SAN FRANCISCO
ELECTION COMMISSION
Please type or print legibly in ink.

1. Information regarding Elected Officer:			
Name (Last)	(First)	(Middle)	Daytime Telephone
CISNEROS	JOSE		(415) 554-7870
Mailing Address	Street	Zip	Fax Telephone
1 DR. CARLTON B GOOLETT PL.			(415) 554-5507
Office Held	Email Address		
TREASURER & TAX COLLECTOR	jose.cisneros@sfgov.org		

2. Purpose of Travel: Keynote speech on Bank On SF program at the International Hispanic Network conference in Miami, FL.

4. Schedule Summary: Total number of pages, including this cover page _____ <i>Check applicable schedules:</i> Schedule A <input checked="" type="checkbox"/> Yes – schedule attached <i>Gift of transportation, lodging or subsistence</i> Schedule B <input type="checkbox"/> Yes – schedule attached <i>Gift to the City of transportation, lodging or subsistence</i> Schedule C <input type="checkbox"/> Yes – schedule attached <i>Reimbursement to the City of gift of transportation, lodging or subsistence</i>

3. Dates of Travel and Itinerary:
05/05/09 San Francisco (CA) - Miami (FL) <small>Month/Day/Year City, State, Country</small>
05/06/09 keynote speech
05/07/09 Miami (FL) - San Francisco (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 <u>5.4.09</u> Signature 

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SAF FRANCISCO ETHICS COMMISSION

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

BY

1. Information regarding entity funding gift of transportation, lodging or subsistence. Full Name of Entity: The Annie E. Casey Foundation. Address: 900 17th NW, ste. 550 Washington DC 20006. Name of Contact Person: Sandra Avila. Email Address: sandra@aecfconsult.org (202) 689-1225

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... \$800.00. 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: The Annie E. Casey Foundation. 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. Name of Individual: N/A. Category: Check box if additional schedules are attached.