

Form SFEC-3.216(d) **Cover Page**

FILED 10 JUL 15 AM 10: 19

SAN FRANCISCO ETHICS COMMISSION

Please type or print legibly in ink.		The state of the s
1. Information regarding Elected Officer:		
Name (Last) (First)	(Middle)	Daytime Telephone
Ting Phil	γ.	<u>(415</u>) <u>554-4999</u>
Mailing Address Street	Zip	Fax Telephone
1 Dr. Carlton B. Goodlett Pl., Room 190	94102	<u>(415</u>) 554-5501
Office Held	Email A	Address
Assessor-Recorder	phil.t	ing@sfgov.org
2. Purpose of Travel: To participate in the San Francisco Shanghai Sister City Committee - Trade and friendship mission to Shanghai.	Total number o	ule Summary: Lepages, including this
	Schedule B	Yes – schedule attached rtation, lodging or subsistence
3. Dates of Travel and Itinerary: 06/12/10 Shanghai, China Month/Day/Year City, State, Country	1 1	Yes – schedule attached to the City of gift of transportation, sistence
· ·	I have used all statement. I ha best of my kno herein and in a complete.	cation: reasonable diligence in preparing this we reviewed this statement and to the wledge, the information contained ny attached schedules is true and penalty of perjury under the laws
	of the State of and correct.	California that the foregoing is true
	Date signed 0	7/12/10
	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
ChinaSF-SF Center for Economic Development	officer's travel, including but not limited to the amount directly related to the cost of the
Address:	officer's transportation, lodging and subsistence.
235 Montgomery St., 12th Floor San Francisco CA 94104 Street City State Zip	\$2,363.90
Name of Contact Person: Ginny Fang	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:	\$2,363.90
gfang@sfced.org (415) 352-8873	
glang@sloca.org (470)esz esz esz	
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 Employer of Contributor Name of Contributor Occupation of Contributor	 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.
Employer of Contributor	Name of Individual Category
Name of Contributor	
Occupation of Contributor	
Employer of Contributor	
☐ Check box if additional schedules are attached.	Check hor if additional schedules are attached

Form SFEC-3.216(d) Schedule B – Gifts to the City

1. Information regarding entity that donated funds to the City that will be	3. Cost of Transportation, Lodging or Subsistence
used by the City to fund the elected	
officer's transportation, lodging or	A. Please list the total amount of costs that will
subsistence	be paid by the entity to fund the elected officer's travel, including but not limited to
Full Name of Entity:	the amount directly related to the cost of the officer's transportation, lodging and
San Francisco Shanghai Sister City Committee	subsistence.
Address:	\$191.99
809 Sacramento Street San Francisco CA 94108	
Street City State Zip	B. Please list the amount in Item A that is directly related to the cost of the officer's transportation, lodging and subsistence.
Name of Contact Person:	
Elizabeth Cheng	<u>\$191.99</u>
Email Address: Telephone:	
LCheng@sfshanghai.com (415)333-3800	
Contriguestation (410) 000 0000	4. Information regarding persons
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	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 subgistence, and
·	subsistence, and who is accompanying the elected officer on the trip.
Employer of Contributor	The is decompanying the elected efficient on the dip
Name of Contributor	Please identify whether the individual is category (a), (b), (c), or (d), as described above.
Occupation of Contributor	Name of Individual Category
Employer of Contributor	and construct to the construction of the const
Name of Contributor	
Occupation of Contributor	
Employer of Contributor	
☐ Check box if additional schedules are attached.	Check box if additional schedules are attached