

1. FILING INFORMATION

## San Francisco Ethics Commission

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## **BUNDLER CONTRIBUTIONS DISCLOSURE REPORT**

Form SFEC-125 A Public Document

Under San Francisco Campaign & Governmental Conduct Code Section 1.125, any committee controlled by a City elective officer or candidate for City elective office that receives contributions totaling \$5,000 or more that have been bundled by a single individual shall file this form at the same time that they are required to file semi-annual or pre-election campaign statements until the committee is terminated. Committees shall be required to provide this information following the receipt of the final contribution that makes the cumulative total \$5,000 or more. For more information visit <a href="www.sfethies.org">www.sfethies.org</a>.

TYPE OF FILING		JEMENT PERIOD	to ()	
DATE OF ORIGINAL FILING (for amendment	. 0.			
AMENDMENT DESCRIPTION (Explain reaso	n for amendment)	Ŏ,		
2. FILER INFORMATION	·			
NAME OF COMMITTEE		FPPC ID	# (if any)	
NAME OF CONTROLLING CANDIDATE OR E	ECTIVE OFFICER			
3. INFORMATION REGARDING BUNDLE NAME OF BUNDLER		UPATION		
NAINE OF BONDLER	Jec	UPATION		
EMPLOYER	,			
STREET ADDRESS				
CITY	STATE	ZI	P CODE	
SAN FRANCISCO ETHICS COMMISSION – SFEC	Form 125 v2019-09-03	<u> </u>		1

3. INFORMATION REGARDING BUNDLER (CONTINUED)			
IS THE BUNDER A MEMBER OF A CITY BOARD OR COMMISSION?	IF YES, NAME OF BOARD OR COMMISSION		
NAME ANY CITY OFFICERS WHO APPOINTED OR NOMINATED THE BUNDLER TO THE BOARD OR COMMISSION			

			$\rightarrow$
	TEMIZED CONTRIBUTIONS		
			form. Include contributor name, date of
	ntribution, and the dollar amount for e	ach contri <mark>bution.</mark>	
#	CONTRIBUTOR NAME	DATE OF CONTRIBUTION	AMOUNT
1			S.
2		"   1	\$
3	50	0	\$
4			\$
5			\$
6			\$
7			\$

## 4. ITEMIZED CONTRIBUTIONS (CONTINUED)

List contributions bundled by the individual identified in Section 3 of this form. Include contributor name, date of contribution, and the dollar amount for each contribution.

CONTRIBUTOR NAME	DATE OF CONTRIBUTION	AMOUNT
		\$
		\$
		\$
		\$
		\$
		\$
CO.,		\$
		\$
		\$
		\$
		\$
	CONTRIBUTOR NAME	Tribution, and the dollar amount for each contribution.  CONTRIBUTOR NAME  DATE OF CONTRIBUTION  DATE OF CONTRIBUTION

4. ľ	4. ITEMIZED CONTRIBUTIONS (CONTINUED)				
List contributions bundled by the individual identified in Section 3 of this form. Include contributor name, date of					
contribution, and the dollar amount for each contribution.					
#	CONTRIBUTOR NAME	DATE OF CONTRIBUTION	AMOUNT		
20			\$		
21			\$		
22			\$		
23					
24			\$		
25			\$		
	Check this box if you need to include information. Select 'Supplemental' for		submit a separate form with complete		
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 I have provided here 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.					
SIG	NATURE	DATE SIGNI	ED		