



# San Francisco Ethics Commission

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Received on:

## FILING OFFICER REPORT Providing FPPC Form 700 Non-Filer Information

Under San Francisco Campaign & Governmental Conduct Code Section 3.1-104(a) departmental filing officers must file this form with the Ethics Commission annually on or before April 10.

This form is to certify that my department has completed the following:

- All designated employees have filed their Statement of Economic Interests (Form 700).  
*(If you checked this box, you only need to fill out the first page.)*

**OR**

- My department has provided names, titles, direct mailing addresses, phone numbers, and email addresses for designated employees who have not filed their Form 700.  
*(If you checked this box, you must also fill out the second page of this form.)*

1. DEPARTMENT INFORMATION		
<i>Form 700 filings for designated employees are kept at the following location in the department.</i>		
NAME OF THE DEPARTMENT, BOARD OR COMMISSION		
STREET ADDRESS		
CITY	STATE	ZIP CODE

2. STAFF CONTACT INFORMATION	
<i>Name of staff person who manages and responds to public disclosure requests for Form 700 filings located at this department.</i>	
STAFF NAME	TITLE
PHONE	EMAIL ADDRESS

3. DEPARTMENT HEAD SIGNATURE	
DEPARTMENT HEAD NAME	DATE THIS FORM WAS COMPLETED
DEPARTMENT HEAD SIGNATURE	DATE OF SIGNATURE

**FILING OFFICER REPORT: CONTACT INFORMATION OF NON-FILERS**

Please provide the information for your designated employees **who have not filed an assuming office, annual, or leaving office FPPC Form 700.**

	First Name	Last Name	Position/Title, Name of Board/Commission/Dept.	Direct Mailing Address	City	State	Zip Code	Type of Filing	Assuming/Leaving Office Date	Email
1										
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**FILING OFFICER REPORT: CONTACT INFORMATION OF NON-FILERS**Please provide the information for your designated employees **who have not filed an assuming office, annual, or leaving office FPPC Form 700.**

	First Name	Last Name	Position/Title, Name of Board/Commission/Dept.	Direct Mailing Address	City	State	Zip Code	Type of Filing	Assuming/Leaving Office Date	Email
14										
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