



San Francisco Ethics Commission

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Received on:

Disclosure Report for Permit Consultants

SFEC Form 3410B

(S.F. Campaign and Governmental Conduct Code § 3.400A et seq.)

A Public Document

1. FILING INFORMATION	
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
PERIOD COVERED	

2. PERMIT CONSULTANT AND EMPLOYER INFORMATION	
NAME OF PERMIT CONSULTANT	NAME OF EMPLOYER
BUSINESS ADDRESS	
BUSINESS TELEPHONE	BUSINESS EMAIL ADDRESS

3. CLIENT INFORMATION		
Enter the name, business address, contact person (if applicable), e-mail address, and business telephone number of each client for whom you performed permit consulting services during the reporting period. Also enter the amount of compensation you or your employer received or expected to receive from each client for permit consulting services during the reporting period.		
#	CLIENT INFORMATION	
1	NAME OF CLIENT	
	BUSINESS ADDRESS OF CLIENT	
	EMAIL ADDRESS OF CLIENT	BUSINESS TELEPHONE OF CLIENT
	AMOUNT OF COMPENSATION	CLIENT CONTACT PERSON
	\$	

2	NAME OF CLIENT	
	BUSINESS ADDRESS OF CLIENT	
	EMAIL ADDRESS OF CLIENT	BUSINESS TELEPHONE OF CLIENT
	AMOUNT OF COMPENSATION \$	CLIENT CONTACT PERSON
3	NAME OF CLIENT	
	BUSINESS ADDRESS OF CLIENT	
	EMAIL ADDRESS OF CLIENT	BUSINESS TELEPHONE OF CLIENT
	AMOUNT OF COMPENSATION \$	CLIENT CONTACT PERSON
4	NAME OF CLIENT	
	BUSINESS ADDRESS OF CLIENT	
	EMAIL ADDRESS OF CLIENT	BUSINESS TELEPHONE OF CLIENT
	AMOUNT OF COMPENSATION \$	CLIENT CONTACT PERSON
<input type="checkbox"/>	ADDITIONAL SUPPLEMENTAL SHEETS REQUIRED Attach additional sheets to this statement to disclose additional clients.	

4. CONTACTS WITH CITY OFFICERS AND EMPLOYEES

Describe each permit sought or obtained for a client (include the application number for the permit) during the reporting period and identify the client for whom you sought or obtained that permit. Also, provide the name each officer or employee of the Department of Building Inspection, the Entertainment Commission, the Planning Department, or the Department of Public Works you contacted in attempting to obtain the permit during the reporting period.

#	PERMIT INFORMATION	
1	PERMIT APPLICATION NUMBER	
	CLIENT REPRESENTED	
	#	OFFICER OR EMPLOYEE CONTACTED
	DEPARTMENT	
	A	
	B	
	C	
2	PERMIT APPLICATION NUMBER	
	CLIENT REPRESENTED	
	#	OFFICER OR EMPLOYEE CONTACTED
	DEPARTMENT	
	A	
	B	
	C	
D		
E		

Sample Copy
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#	PERMIT INFORMATION	
3	PERMIT APPLICATION NUMBER	CLIENT REPRESENTED
	#	OFFICER OR EMPLOYEE CONTACTED
	A	
	B	
	C	
	D	
	E	
4	PERMIT APPLICATION NUMBER	CLIENT REPRESENTED
	#	OFFICER OR EMPLOYEE CONTACTED
	A	
	B	
	C	
	D	
	E	
<input type="checkbox"/>	ADDITIONAL SUPPLEMENTAL SHEETS REQUIRED Attach additional sheets to this statement to disclose additional permits.	

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5. POLITICAL CONTRIBUTIONS

Enter the information below for each political contribution of \$100 or more made by the permit consultant or the permit consultant's employer during the reporting period to:

- an elected official of the City and County,
- a candidate for such office,
- a committee controlled by such officer or candidate,
- a committee primarily formed to support or oppose such officer or candidate, or
- any committee primarily formed to support or oppose a ballot measure to be voted on only in San Francisco.

#	NAME OF OFFICER, CANDIDATE, OR COMMITTEE	DATE OF CONTRIBUTION	AMOUNT OF CONTRIBUTIONS
1			\$
2			\$
3			\$
4			\$
5			\$
6			\$
7			\$
8			\$
9			\$
10			\$

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<input type="checkbox"/> ADDITIONAL SUPPLEMENTAL SHEETS REQUIRED Attach additional sheets to this statement to disclose additional contributions.	
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6. 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.

NAME AND SIGNATURE OF PERSON FILING REPORT

DATE SIGNED

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