



San Francisco Ethics Commission

25 Van Ness Avenue, Suite 220, San Francisco, CA 94102

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Received on:

SFEC Notice of Resignation / Leaving Office

Pursuant to SF C&GCC [Sec. 3.1-105](#), every appointing authority whose appointees file the Form 700 Statement of Economic Interest with the Ethics Commission, required by Sections [3.1-101](#) and [3.1-102](#) of the Campaign and Governmental Conduct Code, shall provide written notice to the Ethics Commission. For appointed department heads, such notice must be provided **within 15 days** of *resignation or retirement*; for commissioners and board members **within 15 days** of the date the City officer *left office*. Per [FPPC Reg. 18722\(a\)\(2\)\(b\)](#), the date that a person permanently leaves office or employment is the date that person is no longer authorized to perform the duties of the office, and stops performing those duties.

The official or the secretary of the board or commission who makes the appointment or receives the resignation or retirement notice must complete this form to notify the Ethics Commission of the resignation, retirement, or leaving office of a Commissioner, Board Member, or Department Head who files a Form 700 Statement of Economic Interest with the Ethics Commission, per in Section [3.1-103](#). Failure to provide such notice may constitute official misconduct ([SF C&GCC Sec. 3.1-105\(a\)](#)).

1. APPOINTING AUTHORITY & SUBMITTER INFORMATION

APPOINTING AUTHORITY (e.g., Mayor, Board of Supervisors, Self-Appointing Board, etc.)

NAME OF PERSON SUBMITTING THIS NOTICE

POSITION OF PERSON SUBMITTING THIS NOTICE

CONTACT NUMBER OF PERSON SUBMITTING THIS NOTICE

E-MAIL OF PERSON SUBMITTING THIS NOTICE

2. APPOINTEE INFORMATION

Complete all fields for each appointee who has resigned or left office or employment.

#	NAME OF APPOINTEE (First / [Middle] / Last)	POSITION OF APPOINTEE	NAME OF DEPARTMENT, COMMISSION OR BOARD	DATE APPOINTEE IS LEAVING OFFICE OR LEFT OFFICE
1				
2				
3				
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Sample Copy
Do Not File

2. APPOINTEE INFORMATION

Complete all fields for each appointee who has resigned or left office or employment.

#	NAME OF APPOINTEE (First / [Middle] / Last)	POSITION OF APPOINTEE	NAME OF DEPARTMENT, COMMISSION OR BOARD	DATE APPOINTEE IS LEAVING OFFICE OR LEFT OFFICE
10				
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Sample Copy
Do Not File

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#	NAME OF APPOINTEE (First / [Middle] / Last)	POSITION OF APPOINTEE	NAME OF DEPARTMENT, COMMISSION OR BOARD	DATE APPOINTEE IS LEAVING OFFICE OR LEFT OFFICE
19				
20				
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#	NAME OF APPOINTEE (First / [Middle] / Last)	POSITION OF APPOINTEE	NAME OF DEPARTMENT, COMMISSION OR BOARD	DATE APPOINTEE IS LEAVING OFFICE OR LEFT OFFICE
28				
29				
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37				
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3. SUBMITTER AUTHORIZATION

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.

SUBMITTED BY:**DATE OF SIGNATURE (mm/dd/yyyy)**