Gift to Agency Report	A Public Docu	ment	GIFT TO AGENCY REPORT
1. Agency Name		Date Stamp	California OO4
San Francisco Film Commissi	on a division in the second	1/1/11	Form OUI
Division, Department, or Region	(if applicable)	7/8/11	For Official Use Only
ζ.,			
Street Address			
City Hall, Room 473 San Fran	cisco, CA 94102		
Area Code/Phone Number   E-	mail	Amendment (evola	in in comment section)
415-554-6241 fil	m@sfgov.org	Amendment (expla	in in comment secucity
Agency Contact (name and title)		Date of Original Filing	:(month, day, year)
Christine Munday, Filming Co	ordinator		
2. Donor Name and Address			
☐ Individual		Other Best Beverage Cat	ering
Last Name	First Name	Other	Name
540 Barneveld Ave, Suite K	San Francisco	CA	94124
Address	City	State	Zip Code
Catering Company	siness activity (if business) or its nature and interests.		
If applicable, identify the name of	each source and the amount(s) solicited or	r received by the donor for this	gifti
	\$		\$
Name	Amount	. Name	Amount
3. Payment Information			
Date and Amount of Paymen	t (other than travel)2/3/2011	2,175.00	
	(month, day, year)	(Round to whole dollars)	
Travel Payment Information	Round to whole dollars) Location of Trave	al	
Date(s) of Travel Transp	sortation Expenses \$ \$	Meal Expenses Other Expe	S S
	tion of the nature and use of the		ency business:
	endees of the Film Commission's qua		
r rovided beer and wine for all	endeed of the 1 lim commission's qua	iterry mixer.	
Identify the officials for wh	nom the payment was used:		
See Attached			
. Last Name	First Name	Title	Department/Division
Last Name	First Name	Title	Department/Division
4. Verification			
I have determined that it is in the in	nterests of the agency to accept this gift ar	nd use it for the official agency	business described above.
//	Susannah Greason Robbins	Executive Director	2/3/2011
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)
Comment: (Use this space or an at	tachment for any additional information.)		

Laurel Barsotti Joan Chen Monico Corral

Susannah Greason Robbins Christine

Peter

Munday

Summerville

Film Commission Film Commission

Port of San Francisco

Film Commission Film Commission

Treasure Island Development Authroity



## DONOR DISCLOSURE/GIFT ACKNOWLEDGEMENT FORM

In order to he	your generous contribution to the San Francisco File the Film Commission comply with San Francisco ple to: laurel.barsotti@sfgov.org	Im Commission. 's Sunshine Ordinance,* we ask that you please complete the	his form and return it as
Thank you ag	ain for contributing to the San Francisco Film Comm	mission.	
Donor: Best	Beverage Catering	Date: February 3rd, 2011	
Gift: Cater	Beverage Catering ing Services	Date: February 3rd, 2011 Estimated Value: \$\frac{1}{2}\frac{175.00}{\text{(For gifts other than cash gifts)}}	<u>s)</u>
Contact Informa	tion:		
Name: Best	Beverage Catering Address: 540 6	Street San Francisco, CA 94124 City, State ZIP code	2-2410
		City, State ZIP code	
The above conta	ct information is: Business Residence		
Financial Interes	t: The Sunshine Ordinance requires that a department that rece e San Francisco City government. Please check the appropriate	eives a gift of money, goods or services worth \$100 or more report any e box or boxes below that describe your financial interest(s) in the City	financial interest that the donor
	Contract with City	(Please describe):	
	Grant from the City	(Please describe):	
	Lease of Space to or from the City	(Please describe):	
	City License, Permit or Entitlement for Use	(Please describe):	
	Pending request for a City Contract, Grant, Lease, License, Permit or Other Entitlement for Use.	(Please describe):	COPY
	Other Financial Interest	(Please describe):	YO,
X	No Financial Interest		1

\*The San Francisco Sunshine Ordinance (San Francisco Administrative Code Chapter 67), as approved by the San Francisco voters in 1999, provides that:

SEC. 67.29-6. Sources of Outside Funding

No official or employee or agent of the city shall accept, allow to be collected, or direct or influence the spending of, any money, or any goods or services worth more than one hundred dollars in aggregate, for the purpose of carrying out or assisting any City function unless the amount and source of all such funds is disclosed as a public record and made available on the website for the department to which the funds are directed. When such funds are provided or managed by an entity, and not an individual, that entity must agree in writing to abide by this ordinance. The disclosure shall include the names of all individuals or organizations contributing such money and a statement as to any financial interest the contributor has involving the City.

Gift to Agency Report	A Public Docu	iment	GIFT TO AGENCY REPO
1. Agency Name		Date Stamp	California O O
San Francisco Film Commission			Form <b>8U</b>
Division, Department, or Region (if applicable)		3/8/11	For Official Use Only
Street Address		$ W_{-}$	-
City Hall, Room 473 San F	rancisco, CA 94102	78	
Area Code/Phone Number	E-mail	☐ Amendment (explai	n in comment postion)
415-554-6241	film@sfgov.org	Amendment (explai	n in comment section)
Agency Contact (name and title	o)	Date of Original Filing:	(month, day, year)
Christine Munday, Filming	Coordinator		(month), day, your
2. Donor Name and Addre	SS		
☐ Individual	First Name	Other California Academy	of Sciences
55 Music Concourse Dr	San Francisco	CA	94118
Address	City	State	Zip Code
Museum			CO
If "Other" is marked, describe the entity	s business activity (if business) or its nature and interests		
If applicable, identify the name	of each source and the amount(s) solicited of	or received by the donor for this	gift:
	\$		\$\$
Name  3. Payment Information	Amount	Name	Amount
Date and Amount of Paym  Travel Payment Information	(month, day, year)	\$	
Provide a specific desc	ansportation Expenses \$	payment for official age	ency business:
Identify the officials for	whom the payment was used:		
See Attached			
Last Name	First Name	Title	Department/Division
Last Name	First Name	Title	Department/Division
. Verification			
I have determined that it is in the	ne interests of the agency to accept this gift a	nd use it for the official agency i	business described above.
122	Susannah Greason Robbins	Executive Director	2/3/2011
Signature of Agency Head or Design		Title	(month, day, year)
Comment: (Use this space or a	n attachment for any additional information.)	•	

Laurel Barsotti Joan Chen Monico Corral

Susannah Greason Robbins Christine Munday

Peter Summerville

Film Commission
Film Commission
Port of San Francisco

Film Commission Film Commission

Treasure Island Development Authroity



## DONOR DISCLOSURE/GIFT ACKNOWLEDGEMENT FORM

Thank you for your generous contribution to the San Francisco Film Commission.
In order to help the Film Commission comply with San Francisco's Sunshine Ordinance,\* we ask that you please complete this form and return it as soon as possible to: laurel.barsotti@sfgov.org Thank you again for contributing to the San Francisco Film Commission. (For gifts other than cash gifts) Contact Information: 55 MUSIC CONCOURSE A. Telephone: 415)379-5132

City, F State CA ZIP code 9418 Address: The above contact information is: Y Business Residence Financial Interest: The Sunshine Ordinance requires that a department that receives a gift of money, goods or services worth \$100 or more report any financial interest that the donor has involving the San Francisco City government. Please check the appropriate box or boxes below that describe your financial interest(s) in the City. Contract with City (Please describe): (Please describe): Grant from the City Lease of Space to or from the City (Please describe): (Please describe): City License, Permit or Entitlement for Use Pending request for a City Contract, Grant, Lease, License, (Please describe): Permit or Other Entitlement for Use. (Please describe): Other Financial Interest No Financial Interest

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Gift to Agency Report	A Public Documen	t	GIFT TO AGENCY REPOR
1. Agency Name		Date Stamp	California O O 4
San Francisco Film Comm	ission	1 1 1 1 1	Form 801
Division, Department, or Region (if applicable)		10/8/11	For Official Use Only
			and the same of th
Street Address		M	
City Hall, Room 473 San F Area Code/Phone Number		y \	
	E-mail	☐ Amendment (explain	in comment section)
415-554-6241 Agency Contact (name and title	film@sfgov.org	Date of Original Filing:	
Christine Munday		Jake of Original Filling.	(month, day, year)
2. Donor Name and Addre			
2. Dollor Name and Addre		W 111 0 4 1	
Individual	First Name	Knights Catering	Name
255 Mendell St	San Francisco	CA	94124
Address	City	State	Zip Code
Catering company.	's business activity (if business) or its nature and interests.		
ii applicable, identity the name	of each source and the amount(s) solicited or receive	ed by the donor for this g	uit:
	\$		\$
Name	Amount	Name	Amount
3. Payment Information			
Date and Amount of Paym	nent (other than travel)2/3/2011 \$	\$2,750.00	
	(month, day, year)	(Round to whole dollars)	
Travel Payment Information	on (Round to whole dollars) Location of Travel		
Date(s) of Travel Tr	ansportation Expenses Lodging Expenses Meal Ex	penses S Other Expen	\$ tes Total Expenses
	ription of the nature and use of the payn		
			OPL
Identify the officials for	whom the payment was used:		
Con Attented			
See Attached  Last Name	First Name	Title	Department/Division
			2 Sparins and Misself
Last Name	First Name	Title	Department/Division
1. Verification			
	ne interests of the agency to accept this gift and use	it for the official agency h	usiness described above
	sara and against to accopt and girt and acc		acinoco accombea above.
Signature of Agency Head or Design		cutive Director	2/8/2011 (month doubless)
Gigilature of Agency Head of Design	rini Name	Title	(month, day, year)
Comment: (Use this space or a	n attachment for any additional information.)		

Laurel Barsotti
Joan Chen
Monico Corral

Susannah Greason Robbins Christine Munday

Peter Summerville

Film Commission
Film Commission

Port of San Francisco

Film Commission Film Commission

Treasure Island Development Authroity



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Thank you In order to soon as po	for your generous contribution to the San Francisco Fi help the Film Commission comply with San Francisco ssible to: laurel.barsotti@sfgov.org	ilm Commission. 's Sunshine Ordinance,* we as	sk that you please complete th	is form and return it as
Thank you	again for contributing to the San Francisco Film Comm	mission.		
Donor: Knig	hts Catering	Date: 2/3/11		
Gift: food		Estimated Value:	2750. (For gifts other than cash gifts)	<u>·</u>
Contact Info	mation:			
Name: Mau The above co	ntact information is:  X Business Residence		Telephone: 415 920 3663	
Financial Into	erest: The Sunshine Ordinance requires that a department that rec the San Francisco City government. Please check the appropriat	eives a gift of money, goods or servi e box or boxes below that describe y	ices worth \$100 or more report any four financial interest(s) in the City.	financial interest that the donor
	Contract with City	(Please describe):		Ca
	Grant from the City	(Please describe):		COPY
	Lease of Space to or from the City	(Please describe):		17
	City License, Permit or Entitlement for Use	(Please describe):		
	Pending request for a City Contract, Grant, Lease, License, Permit or Other Entitlement for Use.	(Please describe):		
	Other Financial Interest	(Please describe):		
X	No Financial Interest			

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