Office of the City Auditor 1221 SW 4th Ave Room 140 Portland, OR 97204

AUD 212-D (01/06)



Phone: 503-823-4078 Fax: 503-823-4571 www.portlandonline.com/auditor

Code Section 2.12.070

City of Portland City Official Quarterly Statement

Quarter Ending:

March 31 2011

1. City Official Information

Name:

Adams, Sam

Title:

Mayor

2. Gifts, Meals or Entertainment Received

List any gifts, meals or entertainment in excess of \$25.00 received from a lobbying entity or any person authorized to lobby on the lobbying entity's behalf, including the name of the lobbying entity and if applicable name of lobbyist, subject of lobbying, value of gift, meal or entertainment, and date of receipt.

No Personal Benefits to Report

I affirm that I have not received any gifts, meals or entertainment in excess of \$25.00 from a lobbying entity or authorized lobbyist this calendar quarter.

Date	Entity	Lobbyist(s)	Subject(s)	Other	Value	Description	
01/21/2011	Portland Business Alliance	Bernie Bottomly	Business and Economic Development		\$240.75	Attend/Speak: PBA Jobs Summit	
03/23/2011	Portland Business Alljance	Sandra McDonough	Business and Economic Development		\$1100.00	Contributions toward the cost of a trade promotion and fact finding mission to Germany.	
01/28/2011	Unregistered Entity	Highlight This Line, Enter Data in	Education	Schoolhouse Supplies	\$45.00	Attend/Speak: 2011 Celebrity Spelling Bee	
03/03/2011	Unregistered Entity	Highlight This Line, Enter Data in	Education	Portland Schools Foundation	\$50.00	Attend/Speak: PSF Annual Roast Festival	

3. Gifts or Donations Received

List any gifts or donations of personal or real property to the City that a lobbyist or lobbying entity has agreed to make upon request by a City Official including the name of the lobbying entity and if applicable name of lobbyist, gift or donation requested by the City Official, the date of request, and the purpose of the donation.

No City Benefits to Report

🖊 I affirm that no lobbying entity agreed to make gifts or donations of personal or real property to the City this calendar quarter based on a request from me.

Date

Lobbyist(s)

Benefit

Purpose

4. Declaration

By signing this document, I acknowledge and affirm under the penalties of false swearing the statements made on this form and that I understand that penalties may be imposed under City Code Chapter 2.12.

City Official signature

To complete your registration, please sign and date this statement. Mail or fax the signed statement to:

City of Portland Office of the City Auditor 1221 SW 4th Avenue Room 140 Portland, OR 97204 FAX 503-823-4571