Office of the City Auditor 1221 SW 4th Ave Room 140 Portland, OR 97204 AUD 212-D (01/06))	S OF TLATOO		www.portlar	hone: 503-823-4078 Fax: 503-823-4571 idonline.com/auditor de Section 2.12.070
	City	City of Portland	mont		
City Official Quarterly Statement					
Quarter Ending:	December 31 2006				
1. City Official Information					
Name: Graff, Shawn Title: Director of Portland Office of Emergency Management					
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
3. Gifts or Donations Received List any gifts or donations of personal or real property to the City requested from a lobbyist or lobbying entity, including the name of the lobbying entity and if applicable name of lobbyist, gift or donation requested, and date of request.					
No City Benefits to Report					
I affirm that I have no gifts or donations of personal or real property to the City to report this calendar quarter.					
Date Enti	ty	Lobbyist(s)		Ве	nefit
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		Date			
To complete your registration, p City of Portland Office of the City Auditor 1221 SW 4th Avenue Room Portland, OR 97204 FAX 503-823-4571	U U	his statement. Mail or fax t	he signed statem	nent to:	