Office of the City Auditor 1221 SW 4th Ave Room 140 Portland, OR 97204 AUD 212-D (01/06)		www.portlan	none: 503-823-4078 Fax: 503-823-4571 donline.com/auditor de Section 2.12.070
	1851		
City of Portland City Official Quarterly Statement			
Quarter Ending: December 31	2006		
1. City Official Information			
Name: Oppenheim, Shoshanah Title: At-will staff for Comm. Ada	ms		
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 Entity	Lobbyist(s)	Ber	nefit
<ul> <li><b>4. Declaration</b>         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.     </li> <li>City Official signature Date</li> </ul>			
City Official Signature	vale	-	
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			