

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



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Fax: 503-823-4571  
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AUD 212-D (01/06)

Code Section 2.12.070

**City of Portland  
City Official Quarterly Statement**

**Quarter Ending:** June 30 2006

**1. City Official Information**

**Name:** Miller, Tom  
**Title:** At-will staff for Comm. Adams

**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
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**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)	Benefit
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**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, please sign and date this statement. Mail or fax the signed statement to:

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