



STATEMENT OF ECONOMIC INTERESTS COVER PAGE

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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE) Breed, London Nicole

1. Office, Agency, or Court

Agency Name (Do not use acronyms) City and County of San Francisco Division, Board, Department, District, if applicable Office of the Mayor Your Position Mayor

If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: *SEE ATTACHED FOR ADDITIONAL POSITIONS Position:

2. Jurisdiction of Office (Check at least one box)

State Multi-County City of San Francisco Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction) County of San Francisco Other

3. Type of Statement (Check at least one box)

Annual: The period covered is January 1, 2019 through December 31, 2019 -or- The period covered is through December 31, 2019 Leaving Office: Date Left (Check one circle) The period covered is January 1, 2019 through the date of leaving office. The period covered is through the date of leaving office. Assuming Office: Date assumed Candidate: Date of Election and office sought, if different than Part 1:

4. Schedule Summary (must complete)

Total number of pages including this cover page: 4

Schedules attached

Schedule A-1 - Investments - schedule attached Schedule A-2 - Investments - schedule attached Schedule B - Real Property - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule D - Income - Gifts - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE San Francisco CA 94102 DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 05/29/2020 (month, day, year)

Signature London Nicole Breed (File the originally signed paper statement with your filing official.)

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
Expanded Statement Attachment

CALIFORNIA FORM 700
<small>FAIR POLITICAL PRACTICES COMMISSION</small>
Name
<u>London Nicole Breed</u>

* This table lists all positions including the primary position listed in the Office, Agency, or Court section of the Cover Page.

Agency	Division/Board/Dept/District	Position	Type of Statement
City and County of San Francisco	Office of the Mayor	Mayor	Annual 1/1/2019 - 12/31/2019
Bay Area Air Quality Management District	Board of Directors	Director	Annual 1/1/2019 - 12/31/2019
Association of Bay Area Governments	Executive Board	Member	Annual 1/1/2019 - 12/31/2019

SCHEDULE D
Income – Gifts

Name
 Breed, London Nicole

▶ NAME OF SOURCE (Not an Acronym)
Universal Tone Management
 ADDRESS (Business Address Acceptable)
Las Vegas, NV 89123
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

Music Management

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>11 / 12 / 19</u>	<u>\$ 211.00</u>	<u>Ticket to Carlos Santana concert</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Hall Wines
 ADDRESS (Business Address Acceptable)
St. Helena, CA 94574
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

Winery

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12 / 14 / 19</u>	<u>\$ 460.00</u>	<u>Holiday luncheon</u>
<u>12 / 14 / 19</u>	<u>\$ 460.00</u>	<u>Holiday luncheon (guest), see comment 2</u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Superfly
 ADDRESS (Business Address Acceptable)
San Francisco, CA 94110
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

Marketing and event planning

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>06 / 22 / 19</u>	<u>\$ 119.00</u>	<u>Attendance at Clusterfest</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Mohammed Nuru
 ADDRESS (Business Address Acceptable)
San Francisco, CA 94124
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>01 / 10 / 19</u>	<u>\$ 4,809.48</u>	<u>Car repair, see comment 1</u>
<u>12 / 24 / 19</u>	<u>\$ 719.29</u>	<u>Car rental, see comment 1</u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

Comments: Comment 1 - Non-reportable per FPPC Reg 18942(a)(18)(C), voluntarily reported. Comment 2 - Reimbursed after 30 days upon learning of valuation for attendance originally believed to be benefit of wine club membership.

SCHEDULE E

Income – Gifts

Travel Payments, Advances, and Reimbursements

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name _____
Breed, London Nicole

- Mark either the gift or income box.
- Mark the 501(c)(3) box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. Per Government Code Section 89506, these payments may not be subject to the gift limit. However, they may result in a disqualifying conflict of interest.
- For gifts of travel, provide the travel destination.

<p>▶ NAME OF SOURCE (Not an Acronym) <u>Bloomberg Harvard City Leadership Initiative</u> ADDRESS (Business Address Acceptable) _____</p> <p>CITY AND STATE _____ <u>Cambridge, MA 02138</u></p> <p><input checked="" type="checkbox"/> 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE _____</p> <p>DATE(S): <u>07 / 14 / 19</u> - <u>07 / 19 / 19</u> AMT: \$ <u>2,610.32</u> (If gift)</p> <p>▶ MUST CHECK ONE: <input checked="" type="checkbox"/> Gift -or- <input type="checkbox"/> Income</p> <p><input type="checkbox"/> Made a Speech/Participated in a Panel</p> <p><input checked="" type="checkbox"/> Other - Provide Description <u>Participate in classes and programs on city leadership</u></p> <p>▶ If Gift, Provide Travel Destination <u>New York, New York</u></p>	<p>▶ NAME OF SOURCE (Not an Acronym) <u>Aspen Institute</u> ADDRESS (Business Address Acceptable) _____</p> <p>CITY AND STATE _____ <u>Washington, DC 20037</u></p> <p><input checked="" type="checkbox"/> 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE _____</p> <p>DATE(S): <u>12 / 05 / 19</u> - <u>12 / 09 / 19</u> AMT: \$ <u>3,693.71</u> (If gift)</p> <p>▶ MUST CHECK ONE: <input checked="" type="checkbox"/> Gift -or- <input type="checkbox"/> Income</p> <p><input type="checkbox"/> Made a Speech/Participated in a Panel</p> <p><input checked="" type="checkbox"/> Other - Provide Description <u>Participate in Rodel Fellowship on public leadership</u></p> <p>▶ If Gift, Provide Travel Destination <u>Aspen, CO</u></p>
<p>▶ NAME OF SOURCE (Not an Acronym) _____ ADDRESS (Business Address Acceptable) _____</p> <p>CITY AND STATE _____</p> <p><input type="checkbox"/> 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE _____</p> <p>DATE(S): ____/____/____ - ____/____/____ AMT: \$ _____ (If gift)</p> <p>▶ MUST CHECK ONE: <input type="checkbox"/> Gift -or- <input type="checkbox"/> Income</p> <p><input type="checkbox"/> Made a Speech/Participated in a Panel</p> <p><input type="checkbox"/> Other - Provide Description _____</p> <p>▶ If Gift, Provide Travel Destination _____</p>	<p>▶ NAME OF SOURCE (Not an Acronym) _____ ADDRESS (Business Address Acceptable) _____</p> <p>CITY AND STATE _____</p> <p><input type="checkbox"/> 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE _____</p> <p>DATE(S): ____/____/____ - ____/____/____ AMT: \$ _____ (If gift)</p> <p>▶ MUST CHECK ONE: <input type="checkbox"/> Gift -or- <input type="checkbox"/> Income</p> <p><input type="checkbox"/> Made a Speech/Participated in a Panel</p> <p><input type="checkbox"/> Other - Provide Description _____</p> <p>▶ If Gift, Provide Travel Destination _____</p>

Comments: _____