

Payment to Agency Report

A Public Document

PAYMENT TO AGENCY REPORT

1. Agency Name

City of Fresno
Division, Department, or Region (if applicable)
Mayor's Office
Street Address
2600 Fresno Street, Fresno, California 93721

Area Code/Phone Number (559) 621-8000
Email Mayor@fresno.gov

Agency Contact (name and title)
Yvonne Spence, City Clerk

RECEIVED Date Stamp

2016 JUL 12 PM 2 41

CITY CLERK, FRESNO CA

California Form 801
For Official Use Only

Amendment (explain in comment section)

Date of Original Filing: (month, day, year)

2. Donor Name and Address

Individual Other Public Policy Institute of California
500 Washington Street, Suite 600 San Francisco CA 94111

Public Policy Non-Profit

If "Other" is marked, describe the entity's business activity (if business) or its nature and interests.

If applicable, identify the name of each source and the amount(s) received by the donor for this payment:

Name Amount Name Amount

3. Payment Information (Complete Sections 3.1 (a or b), 3.2, 3.3)

3.1 (a) Travel Payment Sacramento, CA 5/23/2016
Location of Travel Dates (month, day, year)

American Airlines Rail Air Bus Auto Other
Lodging Expenses \$35.00 Meal Expenses \$184.68 Transportation Expenses \$30.00 Other Expenses \$249.68 Total Expenses

3.1 (b) Payment(s) not related to travel: Dates (month, day, year) Total Expenses

3.2. Payment Description. Provide a specific description of the payment and its agency purpose and use.
PPIC 2016 Speaker Series on California's Future: Poverty and Inequality in California. Mayor participated in a panel discussion. PPIC reimbursed the City for ground transportation and parking totalling \$214.68; the City received reimbursement 7/11/16.

3.3. Identify the officials who used the payment in Section 3.1 (See instructions)

Swearingin Ashley Mayor Mayor's Office
Last Name First Name Position/Title Department/Division

4. Verification

I authorized the acceptance of the reported payment(s) as in compliance with FPPC regulations.

Cheryl Burns Cheryl Burns Executive Assistant to Mayor 07/12/16
Signature Print Name Title (month, day, year)

Comment:

(Use this space or an attachment for any additional information)