

Payment to Agency Report

A Public Document

PAYMENT TO AGENCY REPORT

1. Agency Name
City of South Pasadena
Division, Department, or Region (if applicable)
City Council
Street Address
1414 Mission Street, South Pasadena, CA 91030
Area Code/Phone Number
626-403-7230
Email
amejia@southpasadenaca.gov
Date Stamp
California Form 801
For Official Use Only
Amendment (explain in comment section)
Date of Original Filing: 06/28/16
(month, day, year)

2. Donor Name and Address
Individual
Other Water Education for Latino Leaders
930 Colorado Blvd., Building 2 Los Angeles CA 90041
Address City State Zip Code
Convene statewide educational water conferences for CA state and local Latino elected officials.
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:

3. Payment Information (Complete Sections 3.1 (a or b), 3.2, 3.3)
3.1 (a) Travel Payment
San Jose, CA Location of Travel
March 4-5, 2016 Dates (month, day, year)
Southwest Airlines Transportation Provider
Rail Air Bus Auto Other Check Applicable Boxes
Lodging Expenses Meal Expenses Transportation Expenses Other Expenses 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.
Partial travel stipend to attend WELL Water Conference in San Jose, CA.

3.3. Identify the officials who used the payment in Section 3.1 (See instructions)
Mahmud Diana Mayor City Council
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.
Anthony Mejia Chief City Clerk 06/28/16
Signature Print Name Title (month, day, year)

Comment:
(Use this space or an attachment for any additional information)
FPPC Form 801 (Jan/14)
advice@fppc.ca.gov