

Gift to Agency Report

A Public Document

GIFT TO AGENCY REPORT

1. Agency Name

Date Stamp

California Form 801

For Official Use Only

San Diego Association of Governments

Division, Department, or Region (if applicable)

Street Address

401 B Street, Suite 800

Area Code/Phone Number

619-699-1900

E-mail

Agency Contact (name and title)

Amendment (explain in comment section)

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

2. Donor Name and Address

Individual

Other

Coronado Chamber of Commerce

Last Name

First Name

Name

875 Orange Avenue, Suite 102

Coronado

CA

92118

Address

City

State

Zip Code

Chamber of Commerce

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) solicited or received by the donor for this gift:

Name Amount Name Amount

3. Payment Information

Date and Amount of Payment (other than travel)

7/8/09

(month, day, year)

\$ 4 event tickets @ \$75 each

(Round to whole dollars)

Travel Payment Information (Round to whole dollars)

Location of Travel

Date(s) of Travel Transportation Expenses Lodging Expenses Meal Expenses Other Expenses Total Expenses

Provide a specific description of the nature and use of the payment for official agency business:

Identify the officials for whom the payment was used:

Cheryl Mason (2 tickets)

Last Name

First Name

7/8/09

Title

Service Bureau

Department/Division

Kurt Krohinger (2 tickets)

Last Name

First Name

7/8/09

Title

Technical Services

Department/Division

4. Verification

I have determined that it is in the interests of the agency to accept this gift and use it for the official agency business described above.

Renee Wasmund

Signature of Agency Head or Designee

Renee Wasmund

Print Name

Chief Deputy Exec. Dir.

Title

7/9/09

(month, day, year)

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