

Gift to Agency Report

A Public Document

GIFT TO AGENCY REPORT

1. Agency Name		Date Stamp	California 801 Form For Official Use Only
Public Employment Relations Board			
Division, Department, or Region (if applicable)			
Street Address			
1031 18th Street			
Area Code/Phone Number	E-mail	<input checked="" type="checkbox"/> Amendment (explain in comment section)	
916-322-3112	epotter@perb.ca.gov	Date of Original Filing: 11/19/09 (month, day, year)	
Agency Contact (name and title)			
Eileen Potter, Chief Administrative Officer			

2. Donor Name and Address

Individual _____ Other Carpinteria Assn of United School Emp

_____ Last Name First Name _____ Name

62 Encinal Place Ventura CA 93001

Address City State Zip Code

Union representing school employees

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) _____ \$ _____
(month, day, year) (Round to whole dollars)

Travel Payment Information (Round to whole dollars) Location of Travel Santa Barbara

<u>9/20-25/09</u>	\$ <u>86</u>	\$ <u>378</u>	\$ <u>85</u>	\$ <u>13</u>	\$ <u>562</u>
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:
To preside over the formal hearing Carpinteria Assn of United School Employees & Jay Hotchner v. Carpinteria Unified School District. Unfair Practice Charge No. LA-CE-5045 & LA-CE-5135-E.

Identify the officials for whom the payment was used:

<u>Weinman</u>	<u>Ann</u>	<u>ALJ</u>	<u>PERB</u>
Last Name	First Name	Title	Department/Division
_____	_____	_____	_____
Last Name	First Name	Title	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.

 _____ Eileen Potter _____ Chief Administrative Officer _____ 12/02/06
Signature of Agency Head or Designee Print Name Title (month, day, year)

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