

Gift to Agency Report

A Public Document

GIFT TO AGENCY REPORT

<b>1. Agency Name</b> City of Tustin - Tustin Tiller Days		Date Stamp CITY OF TUSTIN	<b>California Form 801</b> For Official Use Only
Division, Department, or Region (if applicable) →		2009 SEP -1 A 11:04	
Street Address 300 Centennial Way Tustin 92780		<input type="checkbox"/> Amendment (explain in comment section) Date of Original Filing: _____ (month, day, year)	
Area Code/Phone Number 714-573-3326	E-mail		
Agency Contact (name and title) Christine Cleveland Recreation Supervisor			

**2. Donor Name and Address**

Individual \_\_\_\_\_  Other Milam Chiropractic

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Name: \_\_\_\_\_  
13372 New port Ave Suite 1 Tustin CA 92780  
 Address City State Zip Code

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) 8/21/09 \$ \$1,250.00  
 (month, day, year) (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:

_____	_____	_____	_____
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.

Christine Cleveland    Christine Cleveland    Recreation Supervisor    8/24/09  
 Signature of Agency Head or Designee    Print Name    Title    (month, day, year)

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