

Gift to Agency Report

A Public Document

GIFT TO AGENCY REPORT

1. Agency Name

City of Tustin

Division, Department, or Region (if applicable)

Library Fund

Street Address

300 Centennial Way

Area Code/Phone Number

(714) 573-3010

E-mail

Agency Contact (name and title)

Christine Shingleton, Assistant City Manager

CITY OF TUSTIN Date Stamp

2008 NOV 19 P 4: 25

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 Mao Stella Other Name

14851 Bridgeport Road Tustin CA 92780

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:

Stella Mao \$ 400.00 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

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 Shingleton Signature of Agency Head or Designee

Christine Shingleton Print Name

Assistant City Manager Title

11/14/08 (month, day, year)

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

Donation - Library Fund