

Gift to Agency Report

A Public Document

GIFT TO AGENCY REPORT

1. Agency Name CITY of TUSTIN		Date Stamp CITY OF TUSTIN	California 801 Form For Official Use Only
Division, Department, or Region (if applicable) Human Resources		2009 MAY -5 P 2: 59	
Street Address 300 Centennial way; Tustin, CA 92780			
Area Code/Phone Number (714) 573-3000	E-mail	<input type="checkbox"/> Amendment (explain in comment section)	
Agency Contact (name and title)		Date of Original Filing: _____ (month, day, year)	

2. Donor Name and Address

Individual _____ Other TUSTIN Ranch Golf Club

Address: 12442 TUSTIN Ranch Road; TUSTIN, CA 92782

Golf Course & Restaurant

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:

Community Health Charities \$ 314

3. Payment Information

Date and Amount of Payment (other than travel) 5/5/2009 \$ up to \$314

Travel Payment Information (Round to whole dollars) Location of Travel _____

_____ \$ _____ \$ _____ \$ _____ \$ _____

Provide a specific description of the nature and use of the payment for official agency business:
Donation of Sunday Brunch for 2 (\$57.90) and 2 Rounds of Golf w/ Cart (up to \$256) to be used as raffle prizes for charity drive

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.

Signature of Agency Head or Designee _____ Print Name _____ Title _____ (month, day, year) _____

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