

Payment to Agency Report

A Public Document

PAYMENT TO AGENCY REPORT

1. Agency Name County of Monterey		Date Stamp RECEIVED DEC 13 2017	California Form 801 For Official Use Only
Division, Department, or Region (if applicable) Clerk of the Board			
Street Address 168 W. Alisal St., 1st Floor		COUNTY ADMINISTRATIVE OFFICE	
Area Code/Phone Number 831-755-5066	Email cob@co.monterey.ca.us		
Agency Contact (name and title) Gail T. Borkowski			
		<input type="checkbox"/> Amendment (explain in comment section) Date of Original Filing: _____ (month, day, year)	

2. Donor Name and Address

Individual _____ Other Master Municipal Clerk Academy

Last Name: _____ First Name: _____ Name: _____
 P.O. Box 1431 West Sacramento CA 95814
 Address City State Zip Code
 Pamela Miller, Institute Director - www.millermcg.com - Municipal and Clerk of the Board leadership training

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) received by the donor for this payment:

n/a	\$ 0.00	n/a	\$ 0.00
_____	_____	_____	_____
Name	Amount	Name	Amount

3. Payment Information (Complete Sections 3.1 (a or b), 3.2, 3.3)

3.1 (a) Travel Payment Kellogg Center, Pomona, California October 3-6, 2017

Location of Travel Dates (month, day, year)

Southwest Airlines Rail Air Bus Auto Other Kellogg Center Pomona

Transportation Provider Check Applicable Boxes Name of Lodging Facility

\$ 375.00	\$ 195.00	\$ 497.96	\$ 0.00	\$ 1,067.00
Lodging Expenses	Meal Expenses	Transportation Expenses	Other Expenses	Total Expenses

3.1 (b) Payment(s) not related to travel: 0 \$ 1,067.00

Dates (month, day, year) Total Expenses

3.2. Payment Description. Provide a specific description of the payment and its agency purpose and use.

At the request of the Institute Director, Pamela Miller, Gail T. Borkowski was selected as the subject matter expert by the Monterey County County Administrative Officer to participate as a Trainer in the Master Municipal Clerk/Clerk of the Board Academy in October 2017 at the Kellogg Center, Pomona.

3.3. Identify the officials who used the payment in Section 3.1 (See instructions)

<u>Borkowski</u>	<u>Gail T</u>	<u>Clerk of the Board</u>	<u>Clerk of the Board</u>
_____	_____	_____	_____
Last Name	First Name	Position/Title	Department/Division
<u>n/a</u>	<u>n/a</u>	<u>n/a</u>	<u>n/a</u>
_____	_____	_____	_____
Last Name	First Name	Position/Title	Department/Division

4. Verification

I authorized the acceptance of the reported payment(s) as in compliance with FPPC regulations.

[Signature] LEW BADMA ADMINISTRATIVE OFFICER 12/13/17
 Signature Print Name Title (month, day, year)

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

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