

Payment to Agency Report

A Public Document

PAYMENT TO AGENCY REPORT

1. Agency Name City of Murrieta		RECEIVED APR 09 2015 CITY OF MURRIETA CITY CLERK'S OFFICE	California Form 801 For Official Use Only
Division, Department, or Region (if applicable) Parks and Recreation Department			
Street Address 1 Town Square, Murrieta, CA 92562			
Area Code/Phone Number 951-304-2489	Email smanwaring@murrieta.org		<input type="checkbox"/> Amendment (explain in comment section)
Agency Contact (name and title) Sarah Manwaring, City Clerk		Date of Original Filing: _____ (month, day, year)	

2. Donor Name and Address

Individual _____ Other Southern California Edison Company

_____ Last Name _____ First Name _____ Name

14155 Bake Parkway Irvine CA 92618

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) received by the donor for this payment:

_____ \$ _____ Name _____ \$ _____ Amount

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

3.1 (a) Travel Payment

_____ Location of Travel _____ Dates (month, day, year)

_____ Rail Air Bus Auto Other _____

Transportation Provider Check Applicable Boxes Name of Lodging Facility

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

Lodging Expenses Meal Expenses Transportation Expenses Other Expenses Total Expenses

3.1 (b) Payment(s) not related to travel:

2/25/2015 \$ 52,000.00

Dates (month, day, year) Total Expenses

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

1,000 15-gallon trees for streetscapes and irrigated open spaces throughout the City.

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

Kolek	Lea	Parks and Rec Manager	Parks and Recreation
_____	_____	_____	_____
Last Name	First Name	Position/Title	Department/Division
_____	_____	_____	_____
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.

 Rick Dudley City Manager 04/07/15

Signature Print Name Title (month, day, year)

Comment:

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

