

Gift to Agency Report

A Public Document

GIFT TO AGENCY REPORT

1. Agency Name

Date Stamp

California
Form **801**
For Official Use Only

CITY OF WATSONVILLE

Division, Department, or Region (if applicable)

CITY COUNCIL

Street Address

275 MAIN STREET, SUITE 400, WATSONVILLE, CA 95076

Area Code/Phone Number

831-768-3010

E-mail

cityclerk@cityofwatsonville.org

☐ Amendment (explain in comment section)

Date of Original Filing:

(month, day, year)

Agency Contact (name and title)

BEATRIZ VAZQUEZ FLORES

2. Donor Name and Address

☐ Individual

Last Name

First Name

☒ Other

BEIJING ENTRY & EXIT SERVICE ASSOCIATION

Name

No. 3 AnDing Meng Street, East district

Beijing

PR China

Address

City

State

Zip Code

registered NON- PROFIT organization in China, actively assisting international business exchange, co-operate and organize foreign affairs activities

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)

(month, day, year)

\$ _____

(Round to whole dollars)

Travel Payment Information (Round to whole dollars)

Location of Travel

Aug 6-Aug 16, 2017

\$ 3054.64

\$ 1852.94

1350

\$ _____

\$ 6257.58

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:

Payment for travel to China in association with City of Watsonville's Sister City Pinghu, Zhejiang, China Sister City to pursue investment in Watsonville.

Identify the officials for whom the payment was used:

RIOS

Last Name

OSCAR

First Name

MAYOR

Title

COUNCIL

Department/Division

HURST

Last Name

LOWELL

First Name

COUNCIL MEMBER

Title

COUNCIL

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.



Charles Montoya

City Manager

9/27/2017

Signature of Agency Head or Designee

Print Name

Title

(month, day, year)

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