California 801
Form OU
For Official Use Only
ent (explain in comment section)
nal Filing: 01/12/23 (month. day, year)
(month, day, year)
Climate Leadership Group Inc
Name
NY 10117
State Zip Code
taking action on climate change
donor for this payment:
• •
Amount
10/18/22 - 10/23/22
Dates (month, day, year)
Sheraton Buenos Aires Hotel
Name of Lodging Facility
<sub>e</sub> 3,317.80
Total Expenses
\$
Total Expenses
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Department/Division
Department/Division
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(Use this space or an attachment for any additional information)

# Payment to Agency Report Instructions

## A Public Document

California Form 801

This form is used to report certain payments received by state and local government agencies. It includes:

- a payment for an official's travel expenses for the purpose of facilitating the public's business in lieu of a payment using agency funds; and
- a payment that would otherwise be considered a gift or income to the benefiting official, but is instead accepted on behalf of the agency.

FPPC Regulations 18944 and 18950.1 provide a procedure that state and local agencies may use to disclose payments used for agency purposes and paid by a third party. The regulations' reporting procedures provide an alternative means to disclose a payment that may otherwise be considered income or a gift to a benefitting employee and subject to reporting on a Statement of Economic Interest, Form 700.

#### When and Where to File

An agency accepting a payment pursuant to Regulation 18944 and 18950.1 must complete Form 801 for each payment received regardless of the amount. The form must be maintained as a public document. If payments aggregate \$2,500 or more in a calendar quarter, website posting is required.

#### Website Posting:

#### **State Agencies**

Within 30 days after the end of a calendar quarter if aggregated reported payments, for travel and non-travel purposes, total \$2,500 or more:

- the agency must post the reports (or a report summary) on the agency website; and
- forward the information to the FPPC which will also post the information.

## **Local Agencies**

The website posting rules differ for travel and non-travel payments.

#### Travel

Within 30 days after the end of a calendar quarter if aggregated reported payments total \$2,500 or more:

- the agency must post the reports (or a report summary) on the agency website; and
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## **Payments Not Related to Travel**

The agency's filing officer for Statement of Economic Interests, Form 700, must receive the report. Within 30 days after the end of a calendar quarter if aggregated reported payments total \$2,500 or more, the local agency must post the information on the local agency website. A report is not sent to the FPPC unless the agency does not have a website.

Postings must be displayed in a prominent manner and easily accessible. Reports may be posted earlier.

**FPPC**: Statements should be emailed to form801@fppc.ca.gov. Statements may also be mailed to 1102 Q Street, Suite 3000, Sacramento, CA 95811 or faxed to (916) 322-3711.

## Part 1. Agency Identification

List the agency's name and address and the name of an agency contact. Mark the amendment box if changing any information on a previously filed form and include the date of the original filing.

#### Part 2. Donor Information

Disclose the name and address of the donor. If the donor is not an individual, identify the business activity or nature and interests of the entity.

If the donor received funds from other sources that were used in connection with the payment, disclose the name and payment information for each source.

#### Part 3. Payment Information

Expenses may be rounded to whole dollars.

**Section 3.1.a.** Itemize travel payments including departure and return dates. Complete all fields, use "n/a" appropriately. Total the expenses for items such as taxi rides, gratuities, and rental cars in the "other" field and describe in the comments section.

Section 3.1.b. Report agency payments that are not travel related.

### Section 3.2. Description

All payments must include a specific description of the use of the payment and the intended purpose for agency business. For example, a travel payment may read: Travel to attend an EPA co-sponsored solar energy seminar in Washington D.C.

## Section 3.3. Identify Officials

Travel Payments: The name of the position/title and department of each official who used the payment is required. List the official's name if he/she is an elected or appointed official. It is not required to list the names of other officials, rather insert "n/a." Do not leave blank.

Non-Travel Payments: The name, position/title and department of the agency official who used the payment must be identified. All officials' names are required.

#### Part 4. Verification

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Verification of non-travel payments must be signed by the agency head.

Payment to Agency F	Report	A Public I	Document			PAYMENT TO AGENCY REPOR
1. Agency Name	-			Date Sta	mp	California On4
City and County of San Fr		·	Form OUI			
Division, Department, or Re	egion (if applicable)			1		For Official Use Only
Environment Department						
Street Address				1		
1155 Market St., 3rd Floor	r, San Francisco, C	A 94103				
Area Code/Phone Number	Email			□ Amondmo	nt (ovolain	in comment section)
(415) 355-3709	kyle.wehner@sfgov.org			Amendment (explain in comment section)		
Agency Contact (name and title)			Date of Original Filing: 11/02/22 (month, day, year)			
Kyle Wehner, Commission	n Affairs Officer					(month, day, year)
2. Donor Name and Addr	ess					
☐ Individual			_ Other	Urban Sustai	nability	Director's Network(USD
Last Name		t Name	Other			Name
500 Westover Drive #1497	′3 	Sanford			NC	27330
Address		City			State	Zip Code
USDN is a non-profit that b	•		• •	s to work toge	ther.	
If "Other" is marked, describe the entit	ty's business activity (if busi	ness) or its nature and	l interests.			
	identify the name of	each source and t	the amount(s) re	eceived by the o	donor for	this payment:
	Φ.					Φ.
Name	———	Amount		Name		Amount
Transportation Provider  352.64  Lodging Expenses	\$ Rail	Air	\$.	Other Expenses		y Suites Hilton Portland  Name of Lodging Facility  850.60  \$
3.1 (b) Payment(s) not re	•		ΣΑΡΟΠΟΟΟ	\$		
3.1 (b) Fayinent(s) not it	eiateu to traver.		Dates (month, o			Total Expenses
3.2. Payment Description Attend Urban Sustaina 11/13/22-11/15/22. Le climate action.	ability Director N arn from peer ci	etwork (USD ties and contr	N) Western ribute to dia	Regional M logue about	leeting	in Portland OR from
<b>3.3. Identify the officials</b> Chien	who used the pay Richard	ment in Sectio	Sr. Environmer		Env	vironment
Last Name	First Na	me	Position/Title			Department/Division
Last Name	First Na	me	Position/Title			Department/Division
1. Verification I authorized the acceptance	e of the reported pa	. ,	•	ith FPPC regul	lations.	11/04/22
Signature		Print Name		Title		(month, day, year)
V						, , , , , , , , , , , , , , , , , , ,
Comment:						

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Payment to Agency R	eport	A Public Docume	:111	PAYMENT TO AGENCY REPOR
I. Agency Name			Date Stamp	California 201
City and County of San Fra	ncisco		Form OU	
Division, Department, or Reg	jion (if applicable)		For Official Use Only	
Environment Department				
Street Address			$\dashv$	
1155 Market St., 3rd Floor,	San Francisco, CA 9	4103		
Area Code/Phone Number	Email			
(415) 355-3709	kyle.wehner@sfgov	v.org	<b>-</b>	explain in comment section)
Agency Contact (name and title)	1, 00		Date of Original F	iling: 01/10/23
Kyle Wehner, Commission	Affairs Officer			(month, day, year)
2. Donor Name and Addre	SS		C40 Cition Clim	ata Laadarahin Craun Ina
☐ Individual	First M.	Oth	er	ate Leadership Group Inc
120 Park Avenue 23rd Floo	First Na	me New York	N'	
Address		City	Sta	
	urban climate action	•		ing action on climate change
If "Other" is marked, describe the entity			on Mayors tak	
Other to marked, describe the citaly	5 535m555 donvity (ii business	., 5. 10 114416 4114 11161656.		
If applicable, i	dentify the name of eac	h source and the amount(s	s) received by the done	or for this payment:
NA	<b>c</b>			¢
Name	Α	mount	Name	ΦAmount
3. Payment Information (C	omplete Sections	3.1 (a or b). 3.2. 3.3		
3.1 (a) Travel Payment	Montreal	( ,,, 5.0)		/8/22-12/14/22
o. i (a) iiavoi i ayiiiciit		ation of Travel		Dates (month, day, year)
Air Canada	□ Do∷	■ Air □ Duo □ /	Nuta Flothar Sc	onder Saint Paul
Transportation Provider	Rail	Air Bus Applicable Boxes	Auto ☐ Other St	Name of Lodging Facility
0.00	0.00	730.00	0.00	730.00
\$ \$	Meal Expenses	\$ Transportation Expenses	SOther Expenses	\$ Total Expenses
3.1 (b) Payment(s) not re		. NA	\$	
J. (w) i ajmont(o) not lo		Dates (mor	ηth, day, year)	Total Expenses
3.2. Payment Description	Provide a specific	description of the nav	ment and its agen	cv nurnose and use
Payment from C40 was Accelerator workshop, Conference of the Part	s for airfare for En located at Montre	vironment employe al City Hall, down th	e to travel to a Cane street and con	40 Urban Nature current with the 15th
3.3. Identify the officials v	who used the payme	ent in Section 3.1 (See in	nstructions)	
Brastow	Peter	Senior E	nvironmental Spec	Environment
Last Name	First Name		Position/Title	Department/Division
Last Name	First Name		Position/Title	Department/Division
I. Verification				
	of the reported nave	aont(a) as in compliance	with EDDC regulation	one
I authorized the acceptance			•	
Cyput//	Tyrone Jue		cting Director	01/12/23
Signature	Pr	int Name	Title	(month, day, year)
Comment:				
COMMINGIAL.				

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