

Gift to Agency Report

A Public Document

GIFT TO AGENCY REPORT

1. Agency Name <u>Running Springs Water District</u> Division, Department, or Region (if applicable)		Date Stamp	California Form 801 For Official Use Only
Street Address			
Area Code/Phone Number	E-mail <u>rswd@dslextrreme.com</u>	<input type="checkbox"/> Amendment (explain in comment section)	
Agency Contact (name and title) <u>Trevor Miller</u>		Date of Original Filing: _____ (month, day, year)	

2. Donor Name and Address

Individual _____ Other Goble Sampson Associates

3500 South Main St., #200 Salt Lake City UT 84115
Address City State Zip Code

Sales of wastewater treatment equipment
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:

<u>David Ritter</u>	<u>\$ 740.00</u>	_____	\$ _____
Name	Amount	Name	Amount

3. Payment Information

Date and Amount of Payment (other than travel) 9-19-20, 2012 \$210.00
(month, day, year) (Round to whole dollars)

Travel Payment Information (Round to whole dollars) Location of Travel Salt Lake City, UT

<u>9-19-20, 2012</u>	\$ <u>530</u>	\$ <u>170.00</u>	\$ <u>40.00</u>	\$ _____	\$ <u>740.00</u>
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:


On site visit to see quipment being considered for Running Springs Water Dist dewatering project.

Identify the officials for whom the payment was used:

<u>Miller</u>	<u>Treyor</u>	_____	<u>RSWD</u>
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.

	<u>RYAN GROSS</u>	<u>GENERAL MANAGER</u>	<u>9/6/12</u>
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

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