

Payment to Agency Report

A Public Document

PAYMENT TO AGENCY REPORT

<b>1. Agency Name</b> California State University, Fresno		Date Stamp	<b>California Form 801</b> For Official Use Only
Division, Department, or Region (if applicable) Human Resources			
Street Address 5241 N. Maple Ave. Fresno, CA 93740-8020			
Area Code/Phone Number 559-278-2032	Email kirstenc@csufresno.edu	<input type="checkbox"/> Amendment (explain in comment section) Date of Original Filing: _____ (month, day, year)	
Agency Contact (name and title) Kirsten Corey, Conflict of Interest Filing Officer			

2. Donor Name and Address

Individual \_\_\_\_\_  Other Meyers Farms Family Trust

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Name: \_\_\_\_\_  
 P.O. Box 457 Firebaugh CA 93622  
 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	Name	Amount

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

**3.1 (a) Travel Payment** Oregon and Washington 1/13-15/16

Location of Travel Dates (month, day, year)

Private Aircraft \_\_\_\_\_  Rail  Air  Bus  Auto  Other

Transportation Provider Check Applicable Boxes Name of Lodging Facility

\$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ 1,359.00 \$ \_\_\_\_\_ \$ 1,359.00  
 Lodging Expenses Meal Expenses Transportation Expenses Other Expenses Total Expenses

**3.1 (b) Payment(s) not related to travel:** \_\_\_\_\_ \$ \_\_\_\_\_

Dates (month, day, year) Total Expenses

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

Meeting with candidates.

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

<u>DeRuyter</u>	<u>Tim</u>	<u>Head Football Coach</u>	<u>Athletics</u>
Last Name	First Name	Position/Title	Department/Division
<u>Toth, Germano</u>	<u>Nick, Pete</u>	<u>Asst. Football Coaches</u>	<u>Athletics</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.

Deborah Adishian-Astone Interim VP for Administration 01/18/16  
 Signature Print Name Title (month, day, year)

Comment:

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

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Gift to Agency Report

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2. Donor Name and Address

Individual \_\_\_\_\_  Other Meyers Farms Family Trust

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Name: \_\_\_\_\_  
 P.O. Box 457 Address: \_\_\_\_\_ City: Firebaugh State: CA Zip Code: 93622

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 Fresno, CA/So Cal/WA/Nor Cal/Fresno, CA

<u>1/24-29/16</u>	\$ _____	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>4050.00</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:

Recruiting for football.

Identify the officials for whom the payment was used:

<u>DeRuyter</u>	<u>Tim</u>	<u>Head Football Coach</u>	<u>Athletics</u>
Last Name	First Name	Title	Department/Division
<u>Ward</u>	<u>Lorenzo</u>	<u>Asst. Football Coach</u>	<u>Athletics</u>
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>Deborah S. Adishian-Astone</u>	<u>VP for Administration</u>	<u>2/1/16</u>
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

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

Additional travelers: Nick Toth, III, Jordan Peterson, Pete Germano, Asst. FB Coaches