

Gift to Agency Report

A Public Document

GIFT TO AGENCY REPORT

1. Agency Name City of Los Altos		Date Stamp	California Form 801 For Official Use Only
Division, Department, or Region (if applicable) CITY CLERK'S OFFICE		2013 JUL 24 A 9:06	
Street Address 1 North San Antonio Road, Los Altos, California, 94022		CITY OF LOS ALTOS CALIFORNIA	
Area Code/Phone Number 650-947-2700	E-mail administration@losaltosca.gov	<input type="checkbox"/> Amendment (explain in comment section)	
Agency Contact (name and title) Marcia Somers, City Manager		Date of Original Filing: _____ (month, day, year)	

2. Donor Name and Address

Individual Cooper Roderick Other _____
Last Name First Name Name

2625 Middlefield Road Unit 106 Palo Alto CA 94306
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) solicited or received by the donor for this gift:

_____	\$ _____	_____	\$ _____
<small>Name</small>	<small>Amount</small>	<small>Name</small>	<small>Amount</small>

3. Payment Information

Date and Amount of Payment (other than travel) July 23, 2013 \$ 99
(month, day, year) (Round to whole dollars)

Travel Payment Information (Round to whole dollars) Location of Travel _____

_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
<small>Date(s) of Travel</small>	<small>Transportation Expenses</small>	<small>Lodging Expenses</small>	<small>Meal Expenses</small>	<small>Other Expenses</small>	<small>Total Expenses</small>

Provide a specific description of the nature and use of the payment for official agency business:

Donation of food for City Hall lunch

Identify the officials for whom the payment was used: Various City staff members located at City Hall on July 23, 2013.

_____	_____	_____	_____
<small>Last Name</small>	<small>First Name</small>	<small>Title</small>	<small>Department/Division</small>
_____	_____	_____	_____
<small>Last Name</small>	<small>First Name</small>	<small>Title</small>	<small>Department/Division</small>

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.

Marcia Somers Marcia Somers City Manager July 23, 2013
Signature of Agency Head or Designee Print Name Title (month, day, year)

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