

Gift to Agency Report

A Public Document

GIFT TO AGENCY REPORT

1. Agency Name Western Municipal Water District		Date Stamp	California Form 801 For Official Use Only
Division, Department, or Region (if applicable)			
Street Address 450 E. Alessandro Blvd. Riverside, CA.. 92508			
Area Code/Phone Number 951-789-5024	E-mail pwebster@wmwd.com	<input type="checkbox"/> Amendment (explain in comment section) Date of Original Filing: _____ (month, day, year)	
Agency Contact (name and title) Patti A. Webster, Executive Assistant			

2. Donor Name and Address

Individual _____ Other Best Best & Krieger

_____	_____	_____	_____
Last Name	First Name	City	State
3750 University Ave, Suite 400	Riverside	CA	92502-1028
Address	City	State	Zip Code

Attorneys at Law
 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) 12/2/09 \$ 359.00
 (month, day, year) (Round to whole dollars)

Travel Payment Information (Round to whole dollars) Location of Travel Town and Country Hotel, San Diego

_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
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:
 Attend business reception with general counsel on behalf of the District as part of attending the ACWA Conference.

Identify the officials for whom the payment was used:

<u>Rossi</u>	<u>John</u>	<u>General Manager</u>	_____
Last Name	First Name	Title	Department/Division
<u>Rosentrater</u>	<u>Phil</u>	<u>External Affairs Officer</u>	<u>External Affairs</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>John Rossi</u>	<u>General Manager</u>	<u>03/10/10</u>
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

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

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Attachment

Identify the officials for whom the payment was used:

<u>Mercardente</u>	<u>Maria</u>	<u>Legislative Analyst</u>	<u>External Affairs</u>
<u>Last Name</u>	<u>First</u>	<u>Title</u>	<u>Dept/Division</u>