

Gift to Agency Report**A Public Document**

GIFT TO AGENCY REPORT

| | | | |
|--|---|--|--|
| 1. Agency Name Open Space, Parks & Golf, Community Services Department | | Date Stamp | California 801 Form For Official Use Only |
| Division, Department, or Region (if applicable) 3201 East Bayshore Road, Palo Alto CA 94303 | | | |
| Street Address | | | |
| Area Code/Phone Number 650-496-5916 | E-mail Jeanette.Serna@CityofPaloAlto.Org | <input type="checkbox"/> Amendment (explain in comment section) Date of Original Filing: <u>6/30/2020</u> (month, day, year) | |
| Agency Contact (name and title) Jeanette Serna, Coordinator of Public Works Projects | | | |

2. Donor Name and Address

Individual Bigelow Helen Other _____
Last Name First Name Name

501 Portola Road Portola Valley CA 94028
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) 06,30,2020 \$ 1,500.00
(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:

Open Space Adopt-a-Park for a memorial bench at the Palo Alto Baylands.

Identify the officials for whom the payment was used:

| | | | |
|--------------------------|---------------------------|-----------------------|-------------------------------------|
| <u>Do</u> | <u>Lam</u> | <u>Superintendent</u> | <u>Open Space, Parks & Golf</u> |
| <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.

DocuSigned by:
Ed Shikada Ed Shikada City Manager 8/11/2020
Signature of Agency Head or Designee Print Name Title (month, day, year)

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

Certificate Of Completion

| | |
|--|--------------------------------|
| Envelope Id: 634216C2AAD54EDC9477C692637098C8 | Status: Completed |
| Subject: Please DocuSign: Helen Bigelow-3265-801-1.pdf | |
| Source Envelope: | |
| Document Pages: 1 | Signatures: 1 |
| Certificate Pages: 1 | Initials: 0 |
| AutoNav: Enabled | Envelope Originator: |
| Envelopeld Stamping: Enabled | Nelly Baumb |
| Time Zone: (UTC-08:00) Pacific Time (US & Canada) | 250 Hamilton Ave |
| | Palo Alto , CA 94301 |
| | Nelly.Baumb@CityofPaloAlto.org |
| | IP Address: 199.33.32.254 |

Record Tracking

| | | |
|--|---|--------------------|
| Status: Original 8/11/2020 4:41:34 PM | Holder: Nelly Baumb Nelly.Baumb@CityofPaloAlto.org | Location: DocuSign |
| Security Appliance Status: Connected | Pool: StateLocal | |
| Storage Appliance Status: Connected | Pool: City of Palo Alto | Location: DocuSign |

Signer Events

Ed Shikada
ed.shikada@cityofpaloalto.org
Ed Shikada, City Manager
City of Palo Alto
Security Level: Email, Account Authentication (None)

Signature

DocuSigned by:

F2DCA19CCC8D4F9...
Signature Adoption: Pre-selected Style
Using IP Address: 73.231.114.73

Timestamp

Sent: 8/11/2020 4:42:04 PM
Viewed: 8/11/2020 9:49:48 PM
Signed: 8/11/2020 9:50:00 PM

Electronic Record and Signature Disclosure:
Not Offered via DocuSign

In Person Signer Events

Signature

Timestamp

Editor Delivery Events

Status

Timestamp

Agent Delivery Events

Status

Timestamp

Intermediary Delivery Events

Status

Timestamp

Certified Delivery Events

Status

Timestamp

Carbon Copy Events

Status

Timestamp

Witness Events

Signature

Timestamp

Notary Events

Signature

Timestamp

Envelope Summary Events

Status

Timestamps

| | | |
|---------------------|------------------|----------------------|
| Envelope Sent | Hashed/Encrypted | 8/11/2020 4:42:04 PM |
| Certified Delivered | Security Checked | 8/11/2020 9:49:48 PM |
| Signing Complete | Security Checked | 8/11/2020 9:50:00 PM |
| Completed | Security Checked | 8/11/2020 9:50:00 PM |

Payment Events

Status

Timestamps