Sift to Agency Report	A Public	Document		GIFT TO AGENCY REPOR
1. Agency Name			Date Stamp	California 201
Open Space, Parks & Golf, Community Services Department				Form OU I
Division, Department, or Region (if applicable)				For Official Use Only
3201 East Bayshore Road, Palo Alto CA 94303				
Street Address				
Area Code/Phone Number	E-mail		Amendment (explain	in comment coation)
650-496-5916	Jeanette.Serna@CityofPaloAlto	.Org	-	•
Agency Contact (name and title)			Date of Original Filing:	(month, day year)
Jeanette Serna, Coordinato	r of Public Works Projects			(month, day, year)
2. Donor Name and Addres	SS			
	Perrin			
Individual French Last Name	First Name	_ Uotner		Name
1240 Waverley Street	Palo Alto		CA	94301
Address	City		State	Zip Code
If "Other" is marked, describe the entity's	business activity (if business) or its nature and	d interests.		
If applicable, identify the name of	of each source and the amount(s) so	licited or receive	ed by the donor for this g	gift:
Name	\$Amount		Name	\$Amount
B. Payment Information				
•	11 09 2021		100.00	
Date and Amount of Payme	ent (other than travel) 11,08,2021 (month, day, year		(Round to whole dollars)	
Travel Payment Information	n (Round to whole dollars) Location of	of Travel		
		•	•	•
Date(s) of Travel	nsportation Expenses \$Lodging Expenses	_ \$ Meal Exp	enses 5 Other Expen	ses S Total Expenses
Provide a specific descr	iption of the nature and use	of the paym	ent for official age	ency business:
Open Space and Parks Ado	pt-a-Park for the Baylands Natur	re Preserve.		
	p = = = = = = = = = = = = = = = = = = =			
Identify the officials for v	whom the payment was use	d:		
Do	Lam	Superinten		oen Space, Parks & Golf
Last Name	First Name		Title	Department/Division
Last Name	First Name		Title	Department/Division
I. Verification				
I have determined that it is in the	e interests of the agency to accept th	his gift and use i	t for the official agency b	ousiness described above.
DocuSigned by:	3 , ,	3	3 ,	
Ed Shikada	Ed Shikada		Ed Shikada <i>C</i>	ity Man 11 622/2021
E2DCA19CCC8D4E9	Drint Nama			
Signature of Agency Head or Designe	ee Print Name		Title	(month, day, year)
Comment: (Use this space or an	attachment for any additional information	n.)		
, , ,	,	•		

Gift to Agency Report Instructions

A Public Document

California Form 801

This form is for use by all state and local government agencies to disclose payments made to the agency when the payments provide a personal benefit to an official of the agency. Examples may include travel, meals or other benefits. Under certain circumstances, these payments will not result in a gift to the official, but will be considered a gift to the agency. The payments must be used for official agency business and must meet other requirements that are set out in FPPC Regulation 18944.2, which is available on the FPPC website <code>www.fppc.ca.gov.</code>

When to File

This form must be filed within 30 days of the use of the payment. Reports may be faxed, mailed, personally delivered or e-mailed.

Where to File

State Agencies: File this form with the Fair Political Practices Commission ("FPPC"), 428 J Street, Suite 620, Sacramento, CA 95814. Fax: 916-322-0886 E-mail: Form 801@fppc.ca.gov

Local Agencies: File this form with the official that maintains the agency's statements of economic interests (Form 700).

Website Posting: Each agency that maintains a website must also post the form or the information contained on the form on its website within 30 days of the use of the payment. Local agencies that do not maintain a website must forward the form to the FPPC for posting on its website.

Part 1. Agency Identification

List the agency's name and address and the name of an agency contact. Mark the amendment box if changing any information on a previously filed form and include the date of the original filing.

Part 2. Donor Information

Disclose the name and address of the donor. If the donor is not an individual, identify the business activity or nature and interests of the entity.

If the donor received payments from other sources that were used in connection with the activity, disclose the name and payment information for each source.

Part 3. Payment Information

Report the date and amount of each payment. For travel payments, also disclose the location(s), and a breakdown of the expenses. Provide a specific description of the use of the payment and the intended purpose. List each agency official for whom the payment was used.

Example: A business entity paid for an agency employee to travel to attend an informational seminar on solar energy projects in Washington D.C. The description should read: "Travel to attend an EPA cosponsored solar energy seminar held in Washington, D.C."

Part 4. Verification

The agency head or his or her designee must sign the form.

General Information

Gifts to agencies must meet the following requirements:

- The agency head or designee must determine and control the agency's use of the payment.
- The payment must be used for official agency business.
- The donor may identify a purpose for the gift but may not designate by name, title, class or otherwise, an official who may use the payment.
- The agency official who determines who will use the payment may not select himself or herself.

Travel payments must also meet these requirements:

- A payment for travel may not be used by a state or local elected officer or by the state, county, and city officials who hold positions listed in Government Code Section 87200.
- A payment for travel may not exceed the agency's own reimbursement rates for travel, or the State per diem or IRS reimbursement rates if the agency has no policy.
- The agency head or designee must preapprove travel paid for by a third party before travel commences.

Travel payments made by a federal government agency in connection with education, training, or other interagency programs are not reportable.

For further information on filing this report or for general information, contact the FPPC.

Certificate Of Completion

Envelope Id: 732A2FD546364FE691FE3B7BE467B2F5 Status: Completed

Subject: Please DocuSign: Dr. Perrin L. French, M.D. Baylands Nature Preserve-3278-801-1.pdf, Perrin L. ...

Source Envelope:

Document Pages: 3 Signatures: 1 **Envelope Originator:** Certificate Pages: 2 Initials: 0 Jeanette Serna

AutoNav: Enabled 250 Hamilton Ave **Envelopeld Stamping: Enabled** Palo Alto, CA 94301

Time Zone: (UTC-08:00) Pacific Time (US & Canada) Jeanette.Serna@CityofPaloAlto.org

IP Address: 199.33.32.254

Sent: 11/18/2021 3:56:18 PM

Record Tracking

Status: Original Holder: Jeanette Serna Location: DocuSign

Jeanette.Serna@CityofPaloAlto.org 11/18/2021 3:51:02 PM

Security Appliance Status: Connected Pool: StateLocal Storage Appliance Status: Connected Pool: City of Palo Alto Location: DocuSign

DocuSigned by:

Signer Events

(None)

Signature **Timestamp**

Ed Shikada Ed.Shikada@CityofPaloAlto.org Ed Shikada, City Manager City of Palo Alto

Security Level: Email, Account Authentication

Signature Adoption: Pre-selected Style Using IP Address: 199.33.32.254

Ed Shikada Viewed: 11/22/2021 11:23:39 AM F2DCA19CCC8D4F9.. Signed: 11/22/2021 11:25:57 AM

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In Person Signer Events	Signature	Timestamp
Editor Delivery Events	Status	Timestamp
Agent Delivery Events	Status	Timestamp
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Certified Delivery Events	Status	Timestamp
Carbon Copy Events	Status	Timestamp
Danielle Kang	CODTED	Sent: 11/18/2021 3:56:19 PM

COLIFD

Danielle.Kang@CityofPaloAlto.org Admin Asst COPA

Security Level: Email, Account Authentication

Electronic Record and Signature Disclosure:

Not Offered via DocuSign

Jeanette Serna jeanette.serna@cityofpaloalto.org

Coord Pub Wks Proj City of Palo Alto

Security Level: Email, Account Authentication

Electronic Record and Signature Disclosure: Not Offered via DocuSign

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Witness Events	Signature	Timestamp
Notary Events	Signature	Timestamp
Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	11/18/2021 3:56:19 PM
Certified Delivered	Security Checked	11/22/2021 11:23:39 AM
Signing Complete	Security Checked	11/22/2021 11:25:57 AM
Completed	Security Checked	11/22/2021 11:25:57 AM
Payment Events	Status	Timestamps