

Gift to Agency Report

A Public Document

GIFT TO AGENCY REPORT

1. Agency Name Ventura County Fire Protection District		Date Stamp	California Form 801 For Official Use Only
Division, Department, or Region (if applicable)			
Administration			
Street Address 165 Durley Ave., Camarillo, CA 93010			
Area Code/Phone Number 805-389-9700	E-mail bob.roper@ventura.org	<input type="checkbox"/> Amendment (explain in comment section)	
Agency Contact (name and title) Bob Roper - Fire Chief		Date of Original Filing: <u>9/21/11</u> (month, day, year)	

2. Donor Name and Address

Individual _____ Other Southern Calif Edison

_____ Last Name _____ First Name _____ Name

10180 Telegraph Rd. _____ Ventura _____ CA _____ 93003

Address _____ City _____ State _____ Zip Code

Electrical power utility company

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

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 Oxnard Boys/Girls Club

9/19/11 \$ _____ \$ _____ \$ _____ \$ _____ \$ 150.5
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:

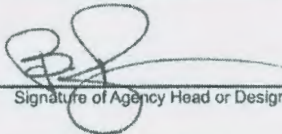
The purpose of the trip was for Edison to share how energy savings and efficiencies can be developed by governmental agencies. Edison also shared how their Big Creek project was developed and how they contribute to "clean" energy efficiencies.

Identify the officials for whom the payment was used:

<u>Roper</u>	<u>Bob</u>	<u>Fire Chief</u>	<u>Administration</u>
_____ Last Name	_____ First Name	_____ Title	_____ Department/Division
_____ 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.

 _____ Bob Roper _____ Fire Chief _____ 9/21/11
Signature of Agency Head or Designee Print Name Title (month, day, year)

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

Form #700 was filed on 9/21/11