

Gift to Agency Report

A Public Document

GIFT TO AGENCY REPORT

1. Agency Name DIABLO WATER DISTRICT		Date Stamp	California Form 801 For Official Use Only
Division, Department, or Region (if applicable)			
Street Address 2107 MAIN STREET, OAKLEY, CA 94561			
Area Code/Phone Number 925-625-3798	E-mail	<input type="checkbox"/> Amendment (explain in comment section) Date of Original Filing: <u>05/13/2013</u> <small>(month, day, year)</small>	
Agency Contact (name and title) MIKE YERAKA, GENERAL MANAGER			

2. Donor Name and Address

Individual _____ Other ACS Government Systems, Inc.,

_____	_____	_____	_____
<small>Last Name</small>	<small>First Name</small>	<small>Name</small>	
<u>1733 Harrodsburg Road</u>	<u>Lexington</u>	<u>KY</u>	<u>40504-3617</u>
<small>Address</small>	<small>City</small>	<small>State</small>	<small>Zip Code</small>

A Xerox Company - Providing government agencies with accounting software operation solutions
 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) 04/10/2013 \$ 485 Conference fee waived
(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:
 In consideration of being a conference speaker, the \$485.00 conference fee was waived which includes 3 breakfasts, 3 lunches, and one evening meal.

Identify the officials for whom the payment was used:

<u>Lester</u>	<u>Jennifer</u>	<u>Acctng. Operations Mgr.</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.

 Mike Yeraka General Manager 5-13-2013
Signature of Agency Head or Designee Print Name Title (month, day, year)

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