

Gift to Agency Report

A Public Document

GIFT TO AGENCY REPORT

1. Agency Name

California Air Resources Board  
 Division, Department, or Region (if applicable)  
 Enforcement  
 Street Address  
 1001 I Street, Sacramento, CA 95812  
 Area Code/Phone Number  
 626-350-6414  
 E-mail  
 alex.barber@arb.ca.gov  
 Agency Contact (name and title)  
 Alexander Barber, Air Pollution Specialist

Date Stamp  
**California Form 801**  
 For Official Use Only  
 Amendment (explain in comment section)  
 Date of Original Filing: \_\_\_\_\_  
 (month, day, year)

2. Donor Name and Address

Individual \_\_\_\_\_  Other Hong Kong Environmental Protection  
 Last Name First Name Name  
33/F., Revenue Tower, 5 Gloucester Wan Chai Road HK  
 Address City State Zip Code

Hong Kong Environmental Protection Department, environmental protection in the Hong Kong area.  
 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:

<u>HKEPD</u>	\$	<u>\$2,284</u>			\$	
Name		Amount	Name		Amount	

3. Payment Information

Date and Amount of Payment (other than travel) 12/2/14 \$ \$2,290  
 (month, day, year) (Round to whole dollars)

Travel Payment Information (Round to whole dollars) Location of Travel Hong Kong  
10/21/14 - 10/25/14 \$ \$1,500 \$ \$600 \$ \$164 \$ \$20 \$ \$2,284  
 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:

Identify the officials for whom the payment was used:

<u>Barber</u>	<u>Alexander</u>	<u>Air Pollution Specialist</u>	<u>ARB / Enforcement</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.

 Richard W. Grogg Executive Officer 2/8/2013  
 Signature of Agency Head or Designee Print Name Title (month, day, year)

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