	Report	A I ublic L	Document		PAYMENT TO AGENCY REPO	
Agency Name				Date Stam	California 20	
California Air Resource Bo	pard				Form OU	
Division, Department, or Re	egion (if applicable)				For Official Use Only	
ndustrial Strategies Divisio	on					
Street Address						
001 I Street						
Area Code/Phone Number Email				☐ Amendment	(explain in comment section)	
916-322-2884 legaloffice@arb.ca.gov				<del>-</del>		
Agency Contact (name and title	)			Date of Original	Filing:(month, day, year)	
₋egal Office						
Donor Name and Addr	ess					
]Individual			_ ■ Other	Danish Ministry	of Foreign Affairs	
Last Name First Name				Name		
2 Bloor Street West Suite 2120 Toronto  city				ON State Zip Code		
Green Hydrogen Delegatio	on in Denmark	Oity		3	Late Zip Oode	
"Other" is marked, describe the entit		ass) or its nature and i	interests			
other is marked, describe the entit	y o business delivity (ii busine	sos, or no nature and i	microsio.			
→ If applicable,	identify the name of ea	ach source and th	he amount(s) re	eceived by the do	nor for this payment:	
	\$				\$	
Name		Amount		Name	Amount	
Payment Information (	Complete Section	ns 3.1 (a or b)	, 3.2, 3.3)			
3.1 (a) Travel Payment	Copenhagen, l	Denmark		1	0/9-13/2023	
	L	ocation of Travel			Dates (month, day, year)	
Scandinavian Airlines	🔲 Rail	■ Air 🔲 🛭	Bus	o □ Other		
Transportation Provider		Check Applicable I	Boxes	_	Name of Lodging Facility	
\$	\$	\$1,939.85	¢		1,939.85	
					\$ <u></u>	
Lodging Expenses	Meal Expenses	Transportation E	 Expenses	Other Expenses	Total Expenses	
	·	Transportation E		\$_	\$Total Expenses	
3.1 (b) Payment(s) not re	elated to travel:		Dates (month, o	day, year)	Total Expenses  Total Expenses	
B.1 (b) Payment(s) not re  B.2. Payment Description  To participate in the G	elated to travel: n. Provide a specif Green Hydrogen [	ic description Delegation to	Dates (month, of the paymon) Denmark;	day, year)  ent and its agei reimburseme	Total Expenses  Total Expenses  ncy purpose and use.	
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(Use this space or an attachment for any additional information)

# Payment to Agency Report Instructions

# A Public Document

California Form 801

This form is used to report certain payments received by state and local government agencies. It includes:

- a payment for an official's travel expenses for the purpose of facilitating the public's business in lieu of a payment using agency funds; and
- a payment that would otherwise be considered a gift or income to the benefiting official, but is instead accepted on behalf of the agency.

FPPC Regulations 18944 and 18950.1 provide a procedure that state and local agencies may use to disclose payments used for agency purposes and paid by a third party. The regulations' reporting procedures provide an alternative means to disclose a payment that may otherwise be considered income or a gift to a benefitting employee and subject to reporting on a Statement of Economic Interest, Form 700.

## When and Where to File

An agency accepting a payment pursuant to Regulation 18944 and 18950.1 must complete Form 801 for each payment received regardless of the amount. The form must be maintained as a public document. If payments aggregate \$2,500 or more in a calendar quarter, website posting is required.

#### Website Posting:

## **State Agencies**

Within 30 days after the end of a calendar quarter if aggregated reported payments, for travel and non-travel purposes, total \$2,500 or more:

- the agency must post the reports (or a report summary) on the agency website; and
- forward the information to the FPPC which will also post the information.

# **Local Agencies**

The website posting rules differ for travel and non-travel payments.

### Travel

Within 30 days after the end of a calendar quarter if aggregated reported payments total \$2,500 or more:

- the agency must post the reports (or a report summary) on the agency website; and
- forward the information to the FPPC.

# **Payments Not Related to Travel**

The agency's filing officer for Statement of Economic Interests, Form 700, must receive the report. Within 30 days after the end of a calendar quarter if aggregated reported payments total \$2,500 or more, the local agency must post the information on the local agency website. A report is not sent to the FPPC unless the agency does not have a website.

Postings must be displayed in a prominent manner and easily accessible. Reports may be posted earlier.

**FPPC**: Statements should be emailed to form801@fppc.ca.gov. Statements may also be mailed to 1102 Q Street, Suite 3000, Sacramento, CA 95811 or faxed to (916) 322-3711.

# 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 funds from other sources that were used in connection with the payment, disclose the name and payment information for each source.

#### Part 3. Payment Information

Expenses may be rounded to whole dollars.

**Section 3.1.a.** Itemize travel payments including departure and return dates. Complete all fields, use "n/a" appropriately. Total the expenses for items such as taxi rides, gratuities, and rental cars in the "other" field and describe in the comments section.

**Section 3.1.b.** Report agency payments that are not travel related.

# Section 3.2. Description

All payments must include a specific description of the use of the payment and the intended purpose for agency business. For example, a travel payment may read: Travel to attend an EPA co-sponsored solar energy seminar in Washington D.C.

# Section 3.3. Identify Officials

Travel Payments: The name of the position/title and department of each official who used the payment is required. List the official's name if he/she is an elected or appointed official. It is not required to list the names of other officials, rather insert "n/a." Do not leave blank.

Non-Travel Payments: The name, position/title and department of the agency official who used the payment must be identified. All officials' names are required.

## Part 4. Verification

Verification of travel payments must be signed by an authorized agency official. Such individuals are those who have the authority to approve similar travel payments when made with agency funds.

Verification of non-travel payments must be signed by the agency head.