	eport		ocument		PAYMENT TO AGENCY REPOR
Agency Name				Date Stamp	California 201
California Air and Res					Form For Official Use Only
Division, Department, or Regi	ion (if applicable)				1 of Official Oct Offic
Executive Office Street Address					
1001 I Street Sacramer	nto, CA 95814				
Area Code/Phone Number	Email			☐ Amendment (ex	plain in comment section)
916-322-2884	legaloffice@arb.ca.gov				
Agency Contact (name and title)				Date of Original Fili	ng:(month, day, year)
Legal Office					
Donor Name and Addres	<b>5S</b>				1 (1)
Individual Last Name	First Name		☐ Other	Aspen Institute Name	
207 5th Ave	S	an Diego		CA	92101
Address		City		State	Zip Code
Corporation					
f "Other" is marked, describe the entity's	s business activity (it busine	ess) or its nature and int	lerests.		
If applicable, ic	dentify the name of ea	ach source and the	∍ amount(s) re	eceived by the donor	for this payment:
	\$				\$
Name		Amount		Name	Amount
Payment Information (C	omplete Section	ıs 3.1 (a or b),	3.2, 3.3)		
3.1 (a) Travel Payment		iami, Florida ocation of Travel			03/11/24 - 03/14/2024 Dates (month, day, year)
United Airlines Transportation Provider	🔲 Rail	<b>⊠</b> Air □ Bu		Other Uma	House by Yurbban South
·		Check Applicable Bo			Name of Lodging Facility
\$\\\ \begin{align*} \	75.00 Meal Expenses	\$ 538.21 Transportation Exp	penses \$_	n/a Other Expenses	\$ <u>1467.71</u> Total Expenses
2.4 (b) Downsont(s) = st =st	ated to travel:		n/a	¢	n/o
3.1 (b) Payment(s) not reid	atou to tiuroi.		11/4	Ψ	n/a
			Dates (month, d		Total Expenses
The Aspen Institute is a society. Executive Office	. <b>Provide a specif</b> I global nonprofi er Steven Cliff s	t organization poke on a par	Dates (month, d of the payme committed nel at Aspe	ent and its agency of to realizing a feen Ideas: Clima	Total Expenses  y purpose and use.  free, just, and equitable te 2024, hosted by the
<b>3.2. Payment Description.</b> The Aspen Institute is a society. Executive Office Aspen Institute. Total lo	Provide a specifold of the specifold of the specific of the sp	t organization poke on a par were \$854.50 s were compe	Dates (month, do of the payme committed nel at Aspe 0, total flight ed by the A	ent and its agency of to realizing a feen Ideas: Clima tht expenses we Aspen Institute.	Total Expenses  y purpose and use.  free, just, and equitable te 2024, hosted by the
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3.2. Payment Description. The Aspen Institute is a society. Executive Office Aspen Institute. Total lo expenses were \$75.00. 3.3. Identify the officials were Cliff  Last Name  n/a	Provide a specific global nonproficer Steven Cliff's odging expenses who used the payments of the reported payments.	t organization poke on a par were \$854.50 s were compenent in Section	Dates (month, do of the payme committed nel at Aspe 0, total fligle ed by the A 3.1 (See instruct Posi Posi	ent and its agency d to realizing a free ldeas: Clima th expenses we Aspen Institute. ctions) ive Officer tion/Title	ree, just, and equitable te 2024, hosted by the ere \$538.21 and meal  CARB/EO  Department/Division  n/a  Department/Division

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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.