

Payment to Agency Report

A Public Document

PAYMENT TO AGENCY REPORT

1. Agency Name City of Long Beach		Date Stamp	California Form 801 For Official Use Only
Division, Department, or Region (if applicable) City Manager's Office			
Street Address 333 W. Ocean Blvd., 13th Floor, Long Beach CA 90802			
Area Code/Phone Number 562-570-5091	Email tom.modica@longbeach.gov	<input type="checkbox"/> Amendment (explain in comment section) Date of Original Filing: _____ (month, day, year)	
Agency Contact (name and title) Tom Modica, Assistant City Manager			

2. Donor Name and Address

Individual _____ Other _____ Race Forward

Last Name First Name Name

900 Alice Street, Suite 400 Oakland CA 94607

Address City State Zip Code

Race Forward, a non-profit organization, oversees Government Alliance on Race and Equity (GARE).

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) received by the donor for this payment:

_____ \$ _____ Name Amount Name Amount

3. Payment Information (Complete Sections 3.1 (a or b), 3.2, 3.3)

3.1 (a) Travel Payment Sacramento and Oakland, CA June 12-13, 2019

Location of Travel Dates (month, day, year)

Southwest, JetBlue, Amtrak Rail Air Bus Auto Other Z Hotel Jack London Square

Transportation Provider Check Applicable Boxes Name of Lodging Facility

\$ 248.11 \$ 93.41 \$ 237.96 \$ _____ \$ 579.48

Lodging Expenses Meal Expenses Transportation Expenses Other Expenses Total Expenses

3.1 (b) Payment(s) not related to travel: N/A \$ _____

Dates (month, day, year) Total Expenses

3.2. Payment Description. Provide a specific description of the payment and its agency purpose and use.

See attachment.

3.3. Identify the officials who used the payment in Section 3.1 (See instructions)

Balderas	Katie	Equity Officer	Health & Human Services
_____	_____	_____	_____
Last Name	First Name	Position/Title	Department/Division
_____	_____	_____	_____
Last Name	First Name	Position/Title	Department/Division

4. Verification

I have reported payment(s) as in compliance with FPPC regulations.

Tom Modica Assistant City Manager 6/24/19

Print Name Title (month, day, year)

Comment:

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

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The Government Alliance on Race & Equity (GARE) covered all expenses for Katie Balderas to participate on a 6/12 panel regarding community engagement and how state agencies can advance racial equity in partnership with local governments. GARE also paid expenses for participation in a 6/13 panel in Oakland for the Northern CA GARE Cohort to discuss community engagement strategies.