

Gift to Agency Report

A Public Document

GIFT TO AGENCY REPORT

1. Agency Name <u>SANTA CLARA COUNTY COUNSEL'S OFFICE</u>		Date Stamp	California Form 801 For Official Use Only
Division, Department, or Region (if applicable)			
Street Address <u>70 W. HEDDING ST., 9th FLOOR</u>			
Area Code/Phone Number <u>408 299 5900</u>	E-mail <u>ann.ravel@cco.sccgov.org</u>	<input type="checkbox"/> Amendment (explain in comment section)	
Agency Contact (name and title) <u>Ann M. Ravel, County Counsel</u>		Date of Original Filing: _____ (month, day, year)	

2. Donor Name and Address

Individual _____ Other BROWN & WINTER

Last Name: _____ First Name: _____ Name: _____
120 BIRMINGHAM DR., CARDIFF BY THE SEA CA 92007
 Address: _____ City: _____ State: _____ Zip Code: _____
LAW FIRM

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:

_____	\$ _____	_____	\$ _____
Name	Amount	Name	Amount

3. Payment Information

Date and Amount of Payment (other than travel) July 28, '08 \$ 495
 (month, day, year) (Round to whole dollars)

Travel Payment Information (Round to whole dollars) Location of Travel _____

_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
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:
Attend seminar on ENVIRONMENTAL RESOURCE LITIGATION

Identify the officials for whom the payment was used:

<u>MITRA</u>	<u>SANDEEP</u>	<u>DEP. CO. COUNSEL</u>	<u>COUNTY COUNSEL</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.

Ann M. Ravel ANN M. RAVEL COUNTY COUNSEL
 Signature of Agency Head or Designee Print Name Title (month, day, year)

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

to Clerk 7/24/08