Payment to Agency Report   A Public Document

California Form 801

1. Agency Name

City of Santa Ana

Division, Department, or Region (if applicable)

City Council

Street Address

20 Civic Center Plaza Santa Ana CA 92701

Area Code/Phone Number | **Email**

714 647-6900 | jessielopez@santa-ana.org

Agency Contact (name and title)

Jessie Lopez, council member

Date Stamp

CLERK OF THE COUNCIL
MAY 2 '22 PM 4:06

For Official Use Only

☐ **Amendment** (explain in comment section)

Date of Original Filing: _____
(month, day, year)

2. Donor Name and Address

☒ Individual Lopez Jessie
    Last Name   First Name

☐ Other _____
   Name

20 Civic Center Plaza Santa Ana CA 92701
Address   City   State   Zip Code

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   Chicago, IL   4/10/2022 - 4/12/2022
   Location of Travel   Dates (month, day, year)

American Airlines
Transportation Provider

☐ Rail ☒ Air ☐ Bus ☐ Auto ☐ Other
Check Applicable Boxes

Swissotel Chicago
Name of Lodging Facility

$584.00 $378.00 $574.20 $0 $1536.86
Lodging Expenses   Meal Expenses   Transportation Expenses   Other Expenses   Total Expenses

3.1 (b) Payment(s) not related to travel: NA $ NA
   Dates (month, day, year)   Total Expenses

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

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

Last Name	First Name	Position/Title	Department/Division

4. Verification

I authorize the ████████ of the reported payment(s) as in compliance with FPPC regulations.

████████   Jessie Lopez   council member   5/2/2022
   Print Name   Title   (month, day, year)

Comment: I have attached the scholarship breakdown form from NALEO.
(Use this space or an attachment for any additional information)

Clear Page