1. Agency Name
San Joaquin County Office of Education

2. Donor Name and Address

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

3.1 (a) Travel Payment

3.1 (b) Payment(s) not related to travel:

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)

4. Verification
I authorized the acceptance of the reported payment(s) as in compliance with FPPC regulations.

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