

Payment to Agency Report

A Public Document

PAYMENT TO AGENCY REPORT

1. Agency Name

County of San Diego

Division, Department, or Region (if applicable)
Board of Supervisors, District 1

Street Address
1600 Pacific Hwy, Ste 335, San Diego

Area Code/Phone Number: 619-531-5511 | Email: Paloma.Aguirre@sdcounty.ca.gov

Agency Contact (name and title)
Andrew Potter, Executive Officer/Clerk of the Board of Supervisors

Date Stamp: _____

California Form 801
For Official Use Only
EDED CLERK OF THE BOARD
ASSESSMENT APPEALS
2025 NOV 20 AM 9:33

Amendment (explain in comment section)

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

2. Donor Name and Address

Individual | Other T2 Borrego LLC

Last Name: _____ First Name: _____ Name: _____

4582 South Ulster St, Ste 1410 | Denver | CO | 80237

Address: _____ City: _____ State: _____ Zip Code: _____

Develops resort golf estate

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

Location of Travel: _____ Dates (month, day, year): _____

Transportation Provider: _____ Rail Air Bus Auto Other

Check Applicable Boxes | Name of Lodging Facility: _____

\$ _____ Lodging Expenses | \$ _____ Meal Expenses | \$ _____ Transportation Expenses | \$ _____ Other Expenses | \$ _____ Total Expenses

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

03/25/24 | \$ 4,900.00

Dates (month, day, year) | Total Expenses


3.2. Payment Description. Provide a specific description of the payment and its agency purpose and use.
For general public events to benefit the community

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

Signature:  | Print Name: Andrew Potter | Title: Executive Officer/Clerk of the Board | 11/19/25 (month, day, year)

Digitally signed by Andrew Potter@sdcounty.ca.gov Date: 2025.11.19 15:28:12 -0800

Comment: Records of donations are available through the Auditor & Controller.

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

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