Payment to Agency R	eport	A Public Doo	ument		PAYMENT TO AGENCY REPO
1. Agency Name	•			Date Stamp	California O O
County of San Diego				Ī	Form 80'
Division, Department, or Region (if applicable)					For Official Use Only
Board of Supervisors, District 2				8 6	
Street Address				K OF THE BOARD EC 10 PK3:15	
1600 Pacific Hwy, Ste 335,	San Diego			11 70	
Area Code/Phone Number	TEmail		_		
619-531-5522	Joel.Anderson@s	decupty on any		Amendment (e	explain in comment section)
	Joel.Anderson@s	dcounty.ca.gov		Date of Original Fi	llina:
Agency Contact (name and title)	riof of Chaff				(month, day, year)
Heather Koszka, Deputy Cl					
2. Donor Name and Addre	SS				-
☐ Individual			Other	3MC Strategies	
Last Name	First N				Name
525 B street, Suite 1420		San Diego		CA	
Address		City		State	te Zip Code
If "Other" is marked, describe the entity	s business activity (if busine	ss) or its nature and intere	sts.		
If applicable, is	dentify the name of ea	ach source and the a	mount(s) re	eceived by the dono	or for this payment.
				, , , , , , , , , , , , , , , , , , ,	n for the paymont.
Name	\$	Amount		Name	\$
3. Payment Information (C	omplete Section	c 2 1 (c or b) 2 4	2 2 2)		
•	ompiete Section	S 3.1 (a or b), 3.	2, 3.3)		
3.1 (a) Travel Payment		ocation of Travel	_		Date (mark)
	L	Caton of Have			Dates (month, day, year)
Transportation Provider	🔲 Rail	☐ Air ☐ Bus	☐ Auto	Other	
transportation Provider		Check Applicable Boxes	i		Name of Lodging Facility
\$ \$		\$	_ \$_		\$
Lodging Expenses	Meal Expenses	Transportation Expens		Other Expenses	Total Expenses
3.1 (b) Payment(s) not rel	ated to travel:		2/1/25		000.00
			ates (month, d		Total Expenses
3.2. Payment Description	. Provide a specifi	c description of t	he payme	ent and its agend	y purpose and use.
For catering and photo	graphy of 2025 I	District 2 Legisla	ative ope	en house.	
5 .	0 1 7	• • • • • • • • • • • • • • • • • • • •			
3.3 Identify the efficials w	who wood the new	ant in Castian 2 d			
3.3. Identify the officials v	mo useu me paym			ctions)	
Anderson	Joel Su		upervisor		District 2
Last Name	First Name	•	Position/Title		Department/Division
Last Name	First Name		Poei	tion/Title	Department/Division
- I io valie		,	Position/Title		Department/Division
	· · · · · · · · · · · · · · · · · · ·				
. Verification					
I authorized the acceptance	of the reported pay	ment(s) as in comp	liance wit	th FPPC regulatio	ons.
Heather Koszka Koszka Heather Koszka Heather Koszka			Depu	ty Chief of Staff	
Date: 2025.12.10 14:05:0	14 -08'00'	Print Name		Title	(month, day, year)
				-	former and family
Comment:					
(Use this space or an attachment for	or any additional informa	tion)			FPPC Form 801 (Jan/1
					advice@fppc.ca.go

Payment to Agency Report

Clear Page

Payment to Agency Report Instructions A Public Document



This form is used to report certain payments received by state and local government agencies. It includes:

- a payment for an official's travel expenses for the purpose of facilitating the public's business in lieu of a payment using agency funds; and
- a payment that would otherwise be considered a gift or income to the benefiting official, but is instead accepted on behalf of the agency.

FPPC Regulations 18944 and 18950.1 provide a procedure that state and local agencies may use to disclose payments used for agency purposes and paid by a third party. The regulations' reporting procedures provide an alternative means to disclose a payment that may otherwise be considered income or a gift to a benefitting employee and subject to reporting on a Statement of Economic Interest, Form 700.

When and Where to File

An agency accepting a payment pursuant to Regulation 18944 and 18950.1 must complete Form 801 for each payment received regardless of the amount. The form must be maintained as a public document. If payments aggregate \$2,500 or more in a calendar quarter, website posting is required.

Website Posting:

State Agencies

Within 30 days after the end of a calendar quarter if aggregated reported payments, for travel and non-travel purposes, total \$2,500 or more:

- the agency must post the reports (or a report summary) on the agency website; and
- forward the information to the FPPC which will also post the information.

Local Agencies

The website posting rules differ for travel and non-travel payments.

Trave

Within 30 days after the end of a calendar quarter if aggregated reported payments total \$2,500 or more:

- the agency must post the reports (or a report summary) on the agency website; and
- forward the information to the FPPC.

Payments Not Related to Travel

The agency's filing officer for Statement of Economic Interests, Form 700, must receive the report. Within 30 days after the end of a calendar quarter if aggregated reported payments total \$2,500 or more, the local agency must post the information on the local agency website. A report is not sent to the FPPC unless the agency does not have a website.

Postings must be displayed in a prominent manner and easily accessible. Reports may be posted earlier.

FPPC: Statements should be emailed to form801@fppc.ca.gov. Statements may also be mailed to 1102 Q Street, Suite 3050, Sacramento, CA 95811 or faxed to (916) 322-3711.

Part 1. Agency Identification

List the agency's name and address and the name of an agency contact. Mark the amendment box if changing any information on a previously filed form and include the date of the original filing.

Part 2. Donor Information

Disclose the name and address of the donor. If the donor is not an individual, identify the business activity or nature and interests of the entity.

If the donor received funds from other sources that were used in connection with the payment, disclose the name and payment information for each source.

Part 3. Payment Information

Expenses may be rounded to whole dollars.

Section 3.1.a. Itemize travel payments including departure and return dates. Complete all fields, use "n/a" appropriately. Total the expenses for items such as taxi rides, gratuities, and rental cars in the "other" field and describe in the comments section.

Section 3.1.b. Report agency payments that are not travel related.

Section 3.2. Description

All payments must include a specific description of the use of the payment and the intended purpose for agency business. For example, a travel payment may read: Travel to attend an EPA co-sponsored solar energy seminar in Washington D.C.

Section 3.3. Identify Officials

Travel Payments: The name of the position/title and department of each official who used the payment is required. List the official's name if he/she is an elected or appointed official. It is not required to list the names of other officials, rather insert "n/a." Do not leave blank.

Non-Travel Payments: The name, position/title and department of the agency official who used the payment must be identified. All officials' names are required.

Part 4. Verification

Verification of travel payments must be signed by an authorized agency official. Such individuals are those who have the authority to approve similar travel payments when made with agency funds.

Verification of non-travel payments must be signed by the agency head.