Payment to Agency Repo	ort A Public Do	cument	PAYMENT TO AGENCY REPOR
1. Agency Name		Date Stamp	California O O 4
elifornia Legislature		Date Stamp	Form <b>OU</b>
/ision, Department, or Region (if applicable)		***************************************	For Official Use Only
Joint Rules Committee/Capitol	Art Program		
Street Address			
1020 N Street, Room 250			8
Area Code/Phone Number Em	ail		
916/651-1504 n/a	a	Amendment (ex	plain in comment section)
Agency Contact (name and title)		Date of Original Fill	
Koren R. Benoit, Capitol Curato	r		(month, day, year)
2. Donor Name and Address			And the second s
Mobetos	Katherine on bet	Alf of Keith Crown Esta	ate Collection
Individual Last Name	First Name	Other	Name
1565 Casa Grande Street	Pasadena	CA	91104
Address	City	State	Zip Code
Collection of artist Keith Crown	co-owned by his daughters, step-	son and grandchildren	
If "Other" is marked, describe the entity's busi	ness activity (if business) or its nature and inter-	ests.	
> # 15 L1- 3.1 15	f. th f		r for this navment:
ir applicable, identi	fy the name of each source and the a	imouni(s) received by the donor	i for this payment.
	\$	Name	\$Amount
Name	Amount		7 STOURING
3. Payment Information (Com	plete Sections 3.1 (a or b), 3	.2, 3.3)	
(a) Travel Payment			D. L. Could down and
6.	Location of Travel		Dates (month, day, year)
Transportation Provider	Rail Air Bus		Name of Lodging Facility
\$ \$	\$ eal Expenses Transportation Expe	S Other Expenses	\$ Total Expenses
3.1 (b) Payment(s) not related	i to travel:	04/04/2025 \$ 5,0	00.00
		Dates (month, day, year)	Total Expenses
3.2. Payment Description. Pr	ovide a specific description of	the payment and its agenc	y purpose and use.
Two original watercolors (unframe	:d):		
	t and Pacific Coast Highway, Manha		982; 22" x 29 3/4"
	Beach Pier with Ocean and Flag, c		
The second of th	used the payment in Section 3	. I (See instructions)	
No specific individual.	See comment section.		December 11Division
Last Name	First Name	Position/Title	Department/Division
Last Name	First Name	Position/Title	Department/Division
1 1 1 1 1 1 1 1			
4. Verification		" " EDDOI-ti-	
I authorized the acceptance of t	he reported payment(s) as in con		111.
WILL SUBTURE	e) EPIKA CONTRERAS		e <u>4/10/25</u>
Signature	LIA LOPEZ	Assembly CAO	4/11/2
Comment: Artwork will be rotate	ed with other pieces in Capitol An	Program collection. See atta	ached for list of co-owners.
(Use this space or an attachment for an			FPPC Form 801 (Jan)

# Payment to Agency Report Instructions

# A Public Document

California 801

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.

#### Travel

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.

# **Keith Crown Estate Collection Co-Owners**

Patricia Crown 2636 Morrow Rd. NE Albuquerque, NM 87106

Paul Kennedy 2828 SW Patton Rd. Portland, OR 97201

Megan K. Grommes 1393 Skiles Lane Arden Hills, MN 55112

Taylor Gresser 3557 Regent Ave. N Crystal, MN 55422

Daniela Gresser 2325 Lenwood Dr. SW Rochester, MN 55902

Anna Gresser 735 Raymond Ave., #211 St. Paul, MN 55114