Gift to Agency Report

1. Agency Name
San Francisco Public Library (SFPL)

Division, Department, or Region (if applicable)
City Librarian's Office

Street Address
100 Larkin Street, San Francisco CA 94102

Area Code/Phone Number E-mail
415-557-4236 citylibrarian@sfpl.org

Agency Contact (name and title)
Michael Lambert, City Librarian

Date Stamp
California Form 801
For Official Use Only

☐ Amendment (explain in comment section)
Date of Original Filing: ________________ (month, day, year)

2. Donor Name and Address
☐ Individual
☐ Other
Friends of San Francisco Public Library

Last Name First Name Name
710 Van Ness Ave. San Francisco CA 94102
Address City State Zip Code

Friends of SFPL: member-supported nonprofit organization that advocates, fundraises, and provides support for SFPL.

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) solicited or received by the donor for this gift:

<table>
<thead>
<tr>
<th>Name</th>
<th>$</th>
<th>Amount</th>
</tr>
</thead>
</table>

3. Payment Information

Date and Amount of Payment (other than travel) 01/14/20 $ 134.24 (Round to whole dollars)

Travel Payment Information (Round to whole dollars)

<table>
<thead>
<tr>
<th>Date(s) of Travel</th>
<th>Transportation Expenses</th>
<th>Lodging Expenses</th>
<th>Meal Expenses</th>
<th>Other Expenses</th>
<th>Total Expenses</th>
</tr>
</thead>
</table>

Provide a specific description of the nature and use of the payment for official agency business:
Ticket to MLK Jr. Breakfast on 01/20/20.

Identify the officials for whom the payment was used:

Lambert
Micha
City Librarian
SFPL

Last Name First Name Title Department/Division

Last Name First Name Title Department/Division

4. Verification

I have determined that it is in the interests of the agency to accept this gift and use it for the official agency business described above.

Signature of Agency Head or Designee
Maureen Singleton
Print Name
COO
Title

01/15/20 (month, day, year)

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