	Report	/ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Ocument			PAYMENT TO AGENCY REPOR	
1. Agency Name	<u> </u>			Date Stam		California O 🗸	
California State University				Buto Stam	۲	Form OU 1	
Division, Department, or F	Region (if applicable)					For Official Use Only	
Office of the Chancellor							
Street Address							
401 Golden Shore							
Area Code/Phone Number	r Email						
562 951-4815	lredfearn@cals	state.edu		Amendment (explain in comment section)			
Agency Contact (name and til	itle)			Date of Original Filing:			
Lori Redfearn						(month, day, year)	
2. Donor Name and Add	iress						
☐ Individual			_	Chartwells			
Last Name	F	First Name		Name			
2 International Drive Address		Rye Brook City			NY 10573 State Zip Code		
Food Service		Oity		3	olale	Zip Code	
If "Other" is marked, describe the er	ntity's business activity (if bu	usinges) or its nature and i	ntoroete				
ii Otilei is marked, describe tile er	ility's business activity (ii bu	isiness) or its nature and i	interests.				
	e, identify the name o	of each source and the	ne amount(s) re	eceived by the do	nor for tl	nis payment:	
	\$			\$		\$	
Name		Amount		Name		Amount	
3. Payment Information	(Complete Secti	ons 3.1 (a or b)	, 3.2, 3.3)				
3.1 (a) Travel Payment	Houston			1	12/13/20)21-12/15/2021	
		Location of Travel		_	D	ates (month, day, year)	
United	□ Ra	ail 🖪 Air 🔲 E	Bus	o	ancast	er	
Transportation Provide		Check Applicable E	_		Na	ame of Lodging Facility	
\$ 500	\$ ²⁰⁰	_{\$} 650	\$	200		\$	
Lodging Expenses	Meal Expenses	Transportation E	xpenses	Other Expenses		Total Expenses	
				\$_			
3.1 (b) Payment(s) not	related to travel:						
3.1 (b) Payment(s) not3.2. Payment Description		cific description	Dates (month, o	,	ncy pu	Total Expenses rpose and use.	
., .	on. Provide a spe	·	of the payme	ent and its age	ncy pu	·	
3.2. Payment Description	on. Provide a spe	·	of the payme	ent and its age		·	
3.2. Payment Description 3.3. Identify the official	on. Provide a spe	ayment in Sectior	of the paymond 3.1 (See instru	ent and its age		rpose and use.	
3.2. Payment Description3.3. Identify the official Fleming	on. Provide a spe Is who used the pa	ayment in Sectior	of the paymond 3.1 (See instru	ent and its age		rpose and use. tracts and Procuremen	
3.2. Payment Description3.3. Identify the official Fleming	on. Provide a spe Is who used the pa	ayment in Section	of the paymon 3.1 (See instru	ent and its age		rpose and use. tracts and Procuremen	
3.2. Payment Description 3.3. Identify the official Fleming Last Name	on. Provide a spe Is who used the pa Tawny	ayment in Section	of the paymon 3.1 (See instru	ent and its age ctions)		tracts and Procuremen Department/Division	
3.2. Payment Description 3.3. Identify the official Fleming Last Name Last Name	on. Provide a spe	ayment in Section	of the payments of the payment	ctions)	Con	tracts and Procuremen Department/Division	
3.3. Identify the official Fleming Last Name Last Name 4. Verification I authorized the acceptant	Is who used the parties of the reported parties of the reported parties.	Name payment(s) as in c	of the payments of the payment	ctions)	Con	tracts and Procuremen Department/Division	
3.2. Payment Description 3.3. Identify the official Fleming Last Name Last Name Last Name	on. Provide a spe	Name payment(s) as in c	of the payments of the payment	ctions) ition/Title th FPPC regula	Con	tracts and Procuremer Department/Division Department/Division	

Payment to Agency Report Instructions

A Public Document

California Form 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 3000, 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.