1. Agency Name
City of Westlake Village
Division, Department, or Region (if applicable)

Street Address
31200 Oak Crest Drive, Westlake Village, CA 91361

Area Code/Phone Number
818-706-1613
Email
beth@wlv.org

2. Donor Name and Address

☐ Individual
☐ Other

Last Name
First Name
Name

374 Poli St.
Ventura
CA 93001

City
State
Zip Code

City Engineer

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

D Rail
☐ Air
☐ Bus
☐ Auto
☐ Other

Transportation Provider

☐ Check Applicable Boxes

Lodging Expenses
Meal Expenses
Transportation Expenses
Other Expenses

$ Lodging Expenses
$ Meal Expenses
$ Transportation Expenses
$ Other Expenses

Total Expenses

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

Dates (month, day, year)

12/7/2016

Total Expenses

$ 3,000.00

3.2. Payment Description. Provide a specific description of the payment and its agency purpose and use.

3.3. Identify the officials who used the payment in Section 3.1 (See instructions)

see page two

Last Name
First Name
Position/Title
Department/Division

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.

Beth A. Schott
City Clerk

Signature
Print Name
Title

12/20/16
(month, day, year)

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

advice@fppc.ca.gov
Payment to Agency Report

1. Agency Name
   City of Westlake Village
   Division, Department, or Region (if applicable)
   Street Address
   31200 Oak Crest Drive, Westlake Village, CA 91361
   Area Code/Phone Number
   818-706-1613
   Email
   beth@wlv.org

2. Donor Name and Address
   □ Individual
   □ Other
   Interwest Consulting Group
   Last Name: Chamberlain
   First Name: S
   Address: 9419 Chamberlain St.
   City: Ventura
   State: CA
   Zip Code: 93004
   City Traffic Engineer
   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:

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

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
   Name of Lodging Facility
   Lodging Expenses
   Meal Expenses
   Transportation Expenses
   Other Expenses
   Total Expenses

   3.1 (b) Payment(s) not related to travel:
   Dates (month, day, year)
   Total Expenses
   $ 1,250.00

3.2. Payment Description. Provide a specific description of the payment and its agency purpose and use.

3.3. Identify the officials who used the payment in Section 3.1 (See instructions)
   Last Name: First Name: Position/Title: Department/Division:
   Last Name: First Name: Position/Title: Department/Division:
   see page two

4. Verification
   I authorized the acceptance of the reported payment(s) as in compliance with FPPC regulations.
   Beth A. Schott
   City Clerk
   12/20/16

   Comment:
   (Use this space or an attachment for any additional information)
**Payment to Agency Report**

**1. Agency Name**

City of Westlake Village

**Division, Department, or Region (if applicable)**

**Street Address**

31200 Oak Crest Drive, Westlake Village, CA 91361

**Area Code/Phone Number**

818-706-1613

**Email**

beth@wlv.org

**Agency Contact (name and title)**

**2. Donor Name and Address**

- **Individual**: Richards, Watson & Gershon
  - Last Name First Name
  - 355 S. Grand Ave., 40th Floor
  - Los Angeles, CA 90071

**City Attorney**

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:**

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

**3. Payment Information (Complete Sections 3.1 (a or b), 3.2, 3.3)**

**3.1 (a) Travel Payment**

- **Location of Travel**
- **Transportation Provider**
- **Check Applicable Boxes**
- **Dates (month, day, year)**

<table>
<thead>
<tr>
<th>Lodging Expenses</th>
<th>Meal Expenses</th>
<th>Transportation Expenses</th>
<th>Other Expenses</th>
<th>Total Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

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

- **12/7/2016**
- **Total Expenses**

**3.2. Payment Description. Provide a specific description of the payment and its agency purpose and use.**

**3.3. Identify the officials who used the payment in Section 3.1 (See instructions)**

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Position/Title</th>
<th>Department/Division</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**4. Verification**

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

**Signature**

Beth A. Schott

**Print Name**

City Clerk

**Title**

City Clerk

**Date of Original Filing**

12/20/16
3. Payment Information

Identify the officials for whom the payment was used:

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arden</td>
<td>Jessica</td>
<td>Deputy City Engineer</td>
</tr>
<tr>
<td>Biery</td>
<td>Robert</td>
<td>City Treasurer</td>
</tr>
<tr>
<td>Boga</td>
<td>Terence</td>
<td>City Attorney</td>
</tr>
<tr>
<td>Borchard</td>
<td>Cindy</td>
<td>Deputy Finance Officer</td>
</tr>
<tr>
<td>Brown</td>
<td>Audrey</td>
<td>Assistant City Manager</td>
</tr>
<tr>
<td>Davis</td>
<td>Ned</td>
<td>Councilmember</td>
</tr>
<tr>
<td>Halpern</td>
<td>Brad</td>
<td>Mayor</td>
</tr>
<tr>
<td>Honig</td>
<td>Kelly</td>
<td>Councilmember</td>
</tr>
<tr>
<td>Hughes</td>
<td>Roxanne</td>
<td>Deputy City Engineer</td>
</tr>
<tr>
<td>Knipe</td>
<td>John</td>
<td>City Engineer</td>
</tr>
<tr>
<td>McSweeney</td>
<td>Sue</td>
<td>Councilmember</td>
</tr>
<tr>
<td>Ogden</td>
<td>Mike</td>
<td>Deputy Finance Officer</td>
</tr>
<tr>
<td>Rutherford</td>
<td>Mark</td>
<td>Mayor Pro Tem</td>
</tr>
<tr>
<td>Schott</td>
<td>Beth</td>
<td>City Clerk</td>
</tr>
<tr>
<td>Taylor</td>
<td>Ray</td>
<td>City Manager</td>
</tr>
<tr>
<td>Wessel</td>
<td>Mark</td>
<td>City Traffic Engineer</td>
</tr>
<tr>
<td>Wolfe</td>
<td>Scott</td>
<td>Planning Director</td>
</tr>
</tbody>
</table>