**Gift to Agency Report**

**A Public Document**

### 1. Agency Name

CITY OF WESTLAKE VILLAGE

**Date Stamp**

**Received**

**DEC 20 2010**

**City of Westlake Village, CA**

**Amendment (explain in comment section)**

**Date of Original Filing:** (month, day, year)

### 2. Donor Name and Address

- **Individual**
- **Last Name**
- **First Name**
- **Address**
- **City**
- **State**
- **Zip Code**

**Other**

- **Name**
- **City**
- **State**
- **Zip Code**

**RICHARDS, WATSON & GERSHON**

355 S. GRAND AVE., 40TH FLOOR

LOS ANGELES

CA

90071-3101

**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) solicited or received by the donor for this gift:

<table>
<thead>
<tr>
<th>Name</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$ 2039.66</td>
</tr>
</tbody>
</table>

### 3. Payment Information

- **Date and Amount of Payment (other than travel)**
  - **Date:** 12/9/10
  - **Amount:** $2040

**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:

Identify the officials for whom the payment was used:

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

### 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**

**RAYMOND B. TAYLOR**

CITY MANAGER

**Title**

**Date:** (month, day, year)

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

   **Agency Contact (name and title)**

2. **Donor Name and Address**
   □ Individual  
   Last Name: WILLDAN  
   First Name:  
   Address: 374 POLI ST., #101  
   City: VENTURA  
   State: CA  
   Zip Code: 93001

   **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) solicited or received by the donor for this gift:

<table>
<thead>
<tr>
<th>Name</th>
<th>$</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>SEE ATTACHED</td>
<td>2039.66</td>
<td></td>
</tr>
</tbody>
</table>

3. **Payment Information**
   **Date and Amount of Payment (other than travel)**
   Date: 12/9/10  
   Amount: $2040

   **Travel Payment Information (Round to whole dollars)**

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   Provide a specific description of the nature and use of the payment for official agency business:

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**
   RAYMOND B. TAYLOR  
   Print Name: CITY MANAGER  
   Title:  
   Date: 12/7/10

   **Comment:** (Use this space or an attachment for any additional information.)
Gift 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
   Agency Contact (name and title)

   Date of Original Filing: ____________

2. Donor Name and Address
   InterWest Consulting Group
   9519 Chamberlain St., Ventura CA 93004
   City Traffic Engineer
   Name: ___________________________
   Address: _________________________
   City: ___________________________
   State: __________________________
   Zip Code: _______________________

   If "Other" is marked, describe the entity's business activity (if business) or its nature and interests.

3. Payment Information
   Date and Amount of Payment (other than travel) ____________ ______________________
   Name: ___________________________
   Amount: $ ____________
   Date (month, day, year): ____________
   (Round to whole dollars)

   Travel Payment Information (Round to whole dollars)
   Location of Travel: ___________________________
   Date(s) of Travel: ___________________________
   Transportation Expenses: $ ____________
   Lodging Expenses: $ ____________
   Meal Expenses: $ ____________
   Other Expenses: $ ____________
   Total Expenses: $ ____________

   Provide a specific description of the nature and use of the payment for official agency business:

   Identify the officials for whom the payment was used:

   SEE PAGE TWO
   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: __________________________
   RAYMOND B. TAYLOR
   Print Name: __________________________
   CITY MANAGER
   Title: __________________________
   Date (month, day, year): ____________

   Comment: (Use this space or an attachment for any additional information.)
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>Biery</td>
<td>Bob</td>
<td>City Treasurer/Finance Officer</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>Davis</td>
<td>Ned</td>
<td>Mayor Pro Tem</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>Rutherford</td>
<td>Mark</td>
<td>Mayor</td>
</tr>
<tr>
<td>Schmitz</td>
<td>Audrey</td>
<td>Assistant City Manager</td>
</tr>
<tr>
<td>Slavin</td>
<td>Bob</td>
<td>Councilmember</td>
</tr>
<tr>
<td>Taylor</td>
<td>Ray</td>
<td>City Manager</td>
</tr>
<tr>
<td>Theobald</td>
<td>Bob</td>
<td>Planning Director</td>
</tr>
<tr>
<td>Wessel</td>
<td>Mark</td>
<td>City Traffic Engineer</td>
</tr>
<tr>
<td>Wiener</td>
<td>Larry</td>
<td>Assistant City Attorney</td>
</tr>
</tbody>
</table>
Nothing Bundt Cakes
1610 E. Thousand Oaks Blvd.
Suite D
Thousand Oaks, CA 91362
(805) 446-3082

Work Order

Work Order #: 16715
Account #: 6187061613
Date: 12/2/2010
Time: 1:53:28 PM
Cashier: 2467
Register #: 1

Reference: 120610CITYOFWESTLAKE
PU

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>DD</td>
<td>Due Date</td>
<td>$0.00</td>
</tr>
<tr>
<td>S</td>
<td></td>
<td>$0.00</td>
</tr>
<tr>
<td>CCC020101</td>
<td>Chocolate Chocolate Chip</td>
<td>$147.50</td>
</tr>
<tr>
<td></td>
<td>5 @ $29.50</td>
<td></td>
</tr>
<tr>
<td>D0040101</td>
<td>Deco Options - F &amp; B</td>
<td>$0.00</td>
</tr>
<tr>
<td></td>
<td>5 @ $0.00</td>
<td></td>
</tr>
<tr>
<td>S</td>
<td></td>
<td>$0.00</td>
</tr>
<tr>
<td>CM10</td>
<td>Thousand Oaks $10.00 Of</td>
<td>($10.00)</td>
</tr>
</tbody>
</table>

Sub Total $137.50
Total $137.50

MASTERCARD Credit Card Tendered $137.50
Card: XXXXXXXXXXXX0342
Auth: 002866
Change Due $0.00

Thank you for shopping
## Catering Event Statement

**Event Date:** 12-9-10  
**Room:** Lakeside Room  
**Client:** City of Westlake Village  
**Address:** 31200 Oak Crest Drive, Westlake Village, CA  
**Phone:** (818) 706-1613  
**Invoice #:** E16243  
**Terms:** MC  
**Manager:** CS

### Food & Beverage Minimum: $1,500.00

<table>
<thead>
<tr>
<th>FOOD</th>
<th>Number</th>
<th>Price Per Person</th>
<th>Total Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parmesan Artichoke Heart</td>
<td>59</td>
<td>$4.00</td>
<td>$236.00</td>
</tr>
<tr>
<td>Bacon-wrapped Scallops</td>
<td>59</td>
<td>$4.00</td>
<td>$236.00</td>
</tr>
<tr>
<td>NAPA VALLEY BUFFET</td>
<td>59</td>
<td>$37.00</td>
<td>$2,183.00</td>
</tr>
<tr>
<td>Client bring in own Cake for dessert - Cutting fee</td>
<td>59</td>
<td>$1.50</td>
<td>$88.50</td>
</tr>
</tbody>
</table>

**Food Sub-Total:** $2,743.50

### Beverage

<table>
<thead>
<tr>
<th>BEVERAGE</th>
<th>Number</th>
<th>Unit Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hosted Wine, Assorted Soft drinks &amp; Beer</td>
<td>1</td>
<td>$938.00</td>
</tr>
</tbody>
</table>

**Bar Sub-Total:** $938.00

### Equipment

<table>
<thead>
<tr>
<th>EQUIPMENT</th>
<th>Number</th>
<th>Price</th>
</tr>
</thead>
</table>

**Equipment Sub-Total:** $0.00

### Other

<table>
<thead>
<tr>
<th>OTHER</th>
<th>Number</th>
<th>Price</th>
</tr>
</thead>
</table>

**Other Sub-Total:** $0.00

### Labor / Misc

<table>
<thead>
<tr>
<th>LABOR / MISC</th>
<th>Number</th>
<th>Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bartender fee</td>
<td>1</td>
<td>$85.00</td>
</tr>
</tbody>
</table>

**Labor / Misc Sub-Total:** $85.00

---

**Credit Card #:** ********** 0342  
**Expiration Date:** 06-2013

**Service Charge 20%:** $736.30  
**Sales Tax 9.75%:** $439.02

**Grand Total:** $4,941.82  
**(Less Deposits Paid):** $5,114.32  
**Total Amount Due:** ($172.50)

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**Client Signature:**

Thank you for your patronage

32001 Agoura Rd., Westlake Village, CA 91361