

Payment to Agency Report

A Public Document

PAYMENT TO AGENCY REPORT

1. Agency Name

Parks and Community Services

Division, Department, or Region (if applicable)

632 West 18th Street, Merced CA

Street Address

209 385-6235

Area Code/Phone Number

Email

JensenC@cityofmerced.org

Agency Contact (name and title)

CHRISTOPHER JENSON

Date Stamp

California Form 801

For Official Use Only

JUL 22 '22 AM 10:45 CITY OF MERCED

Amendment (explain in comment section)

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

2. Donor Name and Address

Individual

Last Name

First Name

Other

Centurian Boat Fineline Industries LLC

Name

2047 Grognan Ave.

Merced

CA

95341

Address

City

State

Zip Code

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:

n/a

Name

\$

Amount

Name

\$

Amount

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

3.1 (a) Travel Payment

n/a

Location of Travel

Dates (month, day, year)

Transportation Provider

Rail

Air

Bus

Auto

Other

Check Applicable Boxes

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

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)

n/a

Last Name

First Name

Position/Title

Department/Division

n/a

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.

Signature

CHRISTOPHER JENSON

Print Name

Director Parks & Rec.

Title

(month, day, year)

Comment:

No payment made, Donation of materials and labor in amount of \$9,000 7/22/22

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

**CITY OF MERCED
DONATION ACCEPTANCE FORM**

Name of Donor: Centurion Boats Fineline Industries LLC

Address: 2047 Grogan Ave City: Merced State: CA Zip: 95341

Description of Donation: Removal & Replacement of the
McNamara Park Gazebo

Donor Estimate of Current Value: 9,000.00

Potential immediate or initial acquisition or installation cost, any on-going maintenance or replacement cost:

Intended Use: Public use of the park

Conditions of Acceptance or Donor Designation: _____

Remarks: _____

Department Receiving Donation: City of Merced Park & Rec

APPROVED/ DISAPPROVED

Date

Department Head Signature

Date

City Manager Signature

Approval of City Council Required if Donation Exceeds \$5,000.

Date Submitted to Council

6/21/22
Date Approved by Council

6/21/22
Date

[Signature]
Mayor Signature

NOTE: The City of Merced cannot guarantee future funding for repair, maintenance, use or replacement of donated items.
cc: City Council, Finance Department, City Clerk

CITY OF MERCED, CALIFORNIA

DONATION AND GIFT POLICY ACKNOWLEDGEMENT

I have received and read the City of Merced Donation and Gift Policy and understand its provisions.

Shell Buchner

Employee (PRINT Name)

Shell Buchner

Employee Signature

6/17/22

Date