A Public Docu	ment		
1. Agency Name			GIFT TO AGENCY REPORT
NUNING SPRINGS WATER DISTRICT Division, Department, or Region (if applicable)		Date Stamp	California 801
Division, Department, or Region (if applicable)			For Official Use Only
FIRE DEDARTMENT			Por Official Use Only
FIRE DEPARTMENT			
2.24			
Area Code/Phone Number E-mail	AFAZ		
Agency Contact (name and little)		Amendment (explain	in comment section)
Agency Contact (name and title)	4	Date of Original Filing:	
		Date of Original Filing:	(month, day, year)
TONY CRAROW FIRE CHIEF			(
Donor Name and Address			
☐ Individual Last Name First Name		Decrees	
Last Name First Name	Jiher	FORMING 2 POTATION	AREA COLDENI C
P.O. BOX 1018 Ronning Spaining		C 1	C 274
Address City	#	State	71382
SCNION CITIZINE CHEUR			rh con
If "Other" is marked, describe the entity's business activity (if business) or its nature and interests.	 		
	4		
If applicable, identify the name of each source and the amount(s) solicited or	receive	d by the donor for this gi	it:
•		•	
Name Amount			\$
Payment Information	Щ	Name	Amount
Travel Payment Information (Round to whole dollars) Location of Travel Date(s) of Travel Stransportation Expenses Lodging Expenses Memory	eal Exper	A. E	•
dentify the officials for whom the payment was used:			
Last Name First Name			
) not value	Tau	le	Department/Division
Last Name First Name	Titl	e	Događeni (O
erification	 		Department/Division
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have determined that it is in the interests of the agency to accept this gift and	se it fo	or the official agency busi	ness described above
		- gondy buo	ness described above
Signature of Agency Head or Designee Print Name -	Ger	neral Manage	10/09/09
Print Name		Title	(month, day, year)
Comment: (Use this space or an attachment for any additional information.)			· · - 7. Jourt
	TOTAL DESIGNATION OF THE PROPERTY OF THE PROPE		
	FPPC Form 801 (June/08) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)		