**Payment to Agency Report**

1. **Agency Name**
   - Mayor and Council Office
   - Division, Department, or Region: Councilmember of District 4

2. **Donor Name and Address**
   - **Individual** or **Other**
   - Center for Popular Democracy
     - 449 Troutman Street, Suite A, Brooklyn NY 11237

3. **Payment Information**
   - **Travel Payment**
     - **JetBlue**: Transportation Provider
     - **Millennium Hilton New York**: Lodging Facility
   - **Transportation Provider**: □ Rail, □ Air, □ Bus, □ Auto, □ Other
   - **Dates (month, day, year)**: Brooklyn, New York ______________ ____________________
   - **Location of Travel**: ______________
   - **Lodging Expenses**: $801.00
   - **Transportation Expenses**: $798.39
   - **Meal Expenses**: $67.00
   - **Other Expenses**: $1,666.39
   - **Total Expenses**: $798.39

4. **Verification**
   - I authorized the acceptance of the reported payment(s) as in compliance with FPPC regulations.
     - Signature: Lan Diep
     - Print Name: Councilmember
     - Title: 11/15/17

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