**Payment to Agency Report**

1. **Agency Name**
   - Mayor and Council Office
   - Councilmember of District 4

2. **Donor Name and Address**
   - □ Individual
   - □ Other
   - Name: The Fund for the City of New York
   - 121 Avenue of the Americas, 6th Floor
   - New York, NY 10013

   **Implement innovations in policy, programs, and technology to advance the function of government/nonprofit organizations.**

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

   **3.1 (a) Travel Payment**
   - Location of Travel: Phoenix, Arizona
   - Dates (month, day, year): May 4, 2018
   - □ Rail □ Air □ Bus □ Auto □ Other
   - Transportation Provider: Southwest
   - The Camby:
   - Name of Lodging Facility: $203.97
   - Meal Expenses: $80.00
   - Transportation Expenses: $203.97
   - Other Expenses: $100.75
   - Total Expenses: $384.72

   **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.**

   - Southwest (SAN-PHX) (PHX-SJC) = 203.97
   - The Camby hotel (shared a room) = 100.75

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

   - Diep Lan

4. **Verification**

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

   **Signature**

   **Print Name**

   **Title**

   **Date**

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