### Payment to Agency Report

#### A Public Document

**1. Agency Name**
- City of San Jose Library - JE
- Division/Department, or Region (if Applicable)
- 150 E San Fernando St. San Jose 95112
- Street Address
- 150 E San Fernando St. San Jose 95112
- Area Code/Phone Number
- Email
- Anh doan@sjlibrary.org
- Agency Contact (name and title)
- Anh Doan, Lib. Assistant

**2. Donor Name and Address**
- If applicable, identify the name of each source and the amount(s) received by the donor for this payment:
  - Anh Doan
    - $4,258.7

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

**3.1 (a) Travel Payment**
- Location of Travel
- Holiday Inn Sacramento
- Dates (month/day/year)
- 5/22, 5/23, 5/24
- Provider
- $4,258.7
- Transportation Expenses
- Meal Expenses
- Other Expenses
- Total Expenses

**3.1 (b) Payment(s) not related to travel:**
- Dates (month/day/year)
- $4,258.7
- 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**
- Anh Doan, Lib. Assistant, Library - JE

**4. Verification**
- I authorized the acceptance of the reported payment(s) as in compliance with FPPC regulations.
- Signature
- Print Name
- Title
- (month, day, year)

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