

Payment to Agency Report

A Public Document

PAYMENT TO AGENCY REPORT

1. Agency Name

Northern California Power Agency
Division, Department, or Region (if applicable)
Administrative Services Division
Street Address
651 Commerce Drive
Area Code/Phone Number
916-781-3636
Email
cary.padgett@ncpa.com
Agency Contact (name and title)
Cary A. Padgett, Executive Assistant

Date Stamp

California 801 Form For Official Use Only

Amendment (explain in comment section)

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

2. Donor Name and Address

Individual Other AEGIS Insurance Services, Inc.
Last Name First Name Name
1 Meadowlands Plaza East Rutherford NJ 07073
Address City State Zip Code

Commercial Property Insurance

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:

Name \$ Amount Name \$ Amount

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

3.1 (a) Travel Payment Denver, Colorado 7/11/22-7/13/22
Location of Travel Dates (month, day, year)

Transportation Provider Rail Air Bus Auto Other Sheraton Denver
Check Applicable Boxes Name of Lodging Facility

\$ 687.00 \$ 240.00 \$ \$ \$
Lodging Expenses Meal Expenses Transportation Expenses Other Expenses Total Expenses

3.1 (b) Payment(s) not related to travel: \$ 927.00
Dates (month, day, year) Total Expenses

3.2. Payment Description. Provide a specific description of the payment and its agency purpose and use.
To attend the AEGIS Policy Holders Conference.

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

Kramer Randall Energy Resource Anal. Risk Management
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 Randy S. Howard General Manager 09/27/22
Print Name Title (month, day, year)

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