Payment to Agency	Report	A Public D	ocument		PAYMENT TO AGENCY REPORT
. Agency Name				Date Stamp	California QO1
San Bernardino County Employees' Retirement Association				Form OUI	
Division, Department, or Region (if applicable)					For Official Use Only
Administration					
Street Address					
348 W. Hospitality Lane	, Third Floor, San Bern	ardino, CA 9241	5-0014		
Area Code/Phone Numbe	r Email			Amendment (explain in comment section)
909.885.7980	dcherney@sbcera	a.org			
Agency Contact (name and t	iitle)			Date of Original F	iling:(month, day, year)
Deborah Cherney, Chie	f Executive Officer				(monul, day, year)
. Donor Name and Add	dress				
			🖸 Other	Milken Institute	
□ Individual	First	Name			Name
1250 Fourth Street		Santa Monica		C	
Address		City		Sta	ate Zip Code
Increase global prosperi	ity by advancing collab	orative solutions	that widen a	access to capital,	create jobs, improve health.
Name	φ	Amount		Name	φ. Amount
 Payment Information 3.1 (a) Travel Payment 	(Complete Section	is 3.1 (a or b),	3.2, 3.3)		
5.1 (d) Havel Payment	L	ocation of Travel			Dates (month, day, year)
Transportation Provid	der 🗌 Rail	Check Applicable Bo		o □Other	Name of Lodging Facility
\$	\$	\$	\$.		\$
Lodging Expenses	Meal Expenses	⊅ Transportation Ex		Other Expenses	Total Expenses
3.1 (b) Payment(s) not	related to travel:		10/12-21/2	Ψ	,000.00
			Dates (month, o	<i>,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Total Expenses
3.2. Payment Descript	ion. Provide a specif	ic description o	f the paym	ent and its agen	cy purpose and use.
	oup called the Glob	oal Capital Ma	•	,	ber 12-21, 2020, as part (Government official's
3.3. Identify the officia	Is who used the payr	nent in Section	3.1 (See instru	ictions)	
Thanki	Amit		Sr. Investm		Investments
Last Name	First Nam	e	Pos	ition/Title	Department/Division

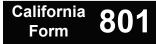
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Last Name	First Name	Position/Title	Department/Division
Last Name	First Name	Position/ Inte	Department/Division
Last Name	First Name	Position/ The	Department/Division

4. Verification

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

	Deborah Cherney	Chief Executive Officer	
Signature	Print Name	Title	(month, day, year)
Comment:			
/lles this succes on an attachment	for one odditional information)		

Payment to Agency ReportInstructionsA Public Document



This form is used to report certain payments received by state and local government agencies. It includes:

- a payment for an official's travel expenses for the purpose of facilitating the public's business in lieu of a payment using agency funds; and
- a payment that would otherwise be considered a gift or income to the benefiting official, but is instead accepted on behalf of the agency.

FPPC Regulations 18944 and 18950.1 provide a procedure that state and local agencies may use to disclose payments used for agency purposes and paid by a third party. The regulations' reporting procedures provide an alternative means to disclose a payment that may otherwise be considered income or a gift to a benefitting employee and subject to reporting on a Statement of Economic Interest, Form 700.

When and Where to File

An agency accepting a payment pursuant to Regulation 18944 and 18950.1 must complete Form 801 for each payment received regardless of the amount. The form must be maintained as a public document. If payments aggregate \$2,500 or more in a calendar quarter, website posting is required.

Website Posting:

State Agencies

Within 30 days after the end of a calendar quarter if aggregated reported payments, for travel and non-travel purposes, total \$2,500 or more:

- the agency must post the reports (or a report summary) on the agency website; and
- forward the information to the FPPC which will also post the information.

Local Agencies

The website posting rules differ for travel and non-travel payments.

Travel

Within 30 days after the end of a calendar quarter if aggregated reported payments total \$2,500 or more:

- the agency must post the reports (or a report summary) on the agency website; and
- forward the information to the FPPC.

Payments Not Related to Travel

The agency's filing officer for Statement of Economic Interests, Form 700, must receive the report. Within 30 days after the end of a calendar quarter if aggregated reported payments total \$2,500 or more, the local agency must post the information on the local agency website. A report is not sent to the FPPC unless the agency does not have a website.

Postings must be displayed in a prominent manner and easily accessible. Reports may be posted earlier.

FPPC: Statements should be emailed to form801@fppc.ca.gov. Statements may also be mailed to 1102 Q Street, Suite 3000, Sacramento, CA 95811 or faxed to (916) 322-3711.

Part 1. Agency Identification

List the agency's name and address and the name of an agency contact. Mark the amendment box if changing any information on a previously filed form and include the date of the original filing.

Part 2. Donor Information

Disclose the name and address of the donor. If the donor is not an individual, identify the business activity or nature and interests of the entity.

If the donor received funds from other sources that were used in connection with the payment, disclose the name and payment information for each source.

Part 3. Payment Information

Expenses may be rounded to whole dollars.

Section 3.1.a. Itemize travel payments including departure and return dates. Complete all fields, use "n/a" appropriately. Total the expenses for items such as taxi rides, gratuities, and rental cars in the "other" field and describe in the comments section.

Section 3.1.b. Report agency payments that are not travel related.

Section 3.2. Description

All payments must include a specific description of the use of the payment and the intended purpose for agency business. For example, a travel payment may read: Travel to attend an EPA co-sponsored solar energy seminar in Washington D.C.

Section 3.3. Identify Officials

Travel Payments: The name of the position/title and department of each official who used the payment is required. List the official's name if he/she is an elected or appointed official. It is not required to list the names of other officials, rather insert "n/a." Do not leave blank.

Non-Travel Payments: The name, position/title and department of the agency official who used the payment must be identified. All officials' names are required.

Part 4. Verification

Verification of travel payments must be signed by an authorized agency official. Such individuals are those who have the authority to approve similar travel payments when made with agency funds.

Verification of non-travel payments must be signed by the agency head.

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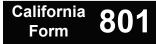
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