A	eport A Publi	c Document		PAYMENT TO AGENCY REPOR
. Agency Name			Date Stamp	California 801
California Natural Resource	s Agency		4.7 1.11.	Form OU
Division, Department, or Reg	ion (if applicable)	. 55	17 JAN 13 JAN 9:	For Official Use Only
Department of Water Resou	urces - Division of Safety of Da	ms		
Street Address	-			
2200 X Street, Suite 200, Sa	acramento, CA 95818			
Area Code/Phone Number	Email		[7]	
916-227-9800	michael.waggoner@water.ca	.gov	Amendment (explain	in comment section)
Agency Contact (name and title)			Date of Original Filing:	-13-17
Michael Waggoner, Chief, F	ield Engineering Branch			(month, day, year)
				<u> </u>
Donor Name and Addres			Desifie Can and Flor	itria Campanii
☐ Individual N/A	N/A	Other	Pacific Gas and Elec	
33755 Old Mill Road	First Name Auberry		CA	Name 93602
Address	City		State	Zip Code
Hydroelectric Power Genera				
	s business activity (if business) or its nature	and interests		
ii Other is marked, describe the entity a	s business activity (ii business) of its hattie	and interests.		
If applicable, ic	dentify the name of each source as	nd the amount(s) re	eceived by the donor for	this payment:
N/A	\$ 0.00	N/A		€ 0.00
Name	Amount		Name	Ψ
Transportation Provider \$\frac{0.00}{\text{Lodging Expenses}}\$.	0.00 Check Applica		O.00 Other Expenses	Name of Lodging Facility 100.00 Total Expenses
3.1 (b) Payment(s) not rela	ated to travel:	N/A	\$ 0.00	
		Dates (month, d	av. vearì	Total Expenses
2.2 Daymant Decariation				Total Expenses
3.2. Payment Description,	Provide a specific descripti	ion of the payme		•
The dam needed to be was not possible since (approx. 10 minutes ea	Provide a specific descriptic accessed for a constructic the reservoir was drawn only way) was the only way who used the payment in Sec	ion inspection. down for const y to access the	ent and its agency portion Normal access is truction work. Hele dam.	urpose and use.
The dam needed to be was not possible since (approx. 10 minutes ea	accessed for a constructi the reservoir was drawn o ch way) was the only way	ion inspection. down for const y to access the	ent and its agency portion Normal access is truction work. Hele dam.	urpose and use.
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The dam needed to be was not possible since (approx. 10 minutes ea 3.3. Identify the officials was mangney	accessed for a construction the reservoir was drawn on the color way) was the only way who used the payment in Sec	ion inspection. down for const to access the tion 3.1 (See instruct Sup. Engine	ent and its agency portion Normal access is cruction work. Helectrons	urpose and use. s by boat, but this icopter travel
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The dam needed to be was not possible since (approx. 10 minutes ea 3.3. Identify the officials was mangney	accessed for a construction the reservoir was drawn on the color way) was the only way who used the payment in Sec	ion inspection. down for const to access the tion 3.1 (See instruct Sup. Engine	ent and its agency portion Normal access is cruction work. Helectrons	urpose and use. s by boat, but this icopter travel
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The dam needed to be was not possible since (approx. 10 minutes ea 3.3. Identify the officials was Mangney	accessed for a construction the reservoir was drawn on the reservoir was drawn on the control of	ion inspection. down for const to access the tion 3.1 (See instruct Sup. Engine	ent and its agency portion Normal access is cruction work. Help dam. ctions) eer, W.R. DW dion/Title	urpose and use. s by boat, but this icopter travel VR/DSOD Department/Division
The dam needed to be was not possible since (approx. 10 minutes ea 3.3. Identify the officials was Name Last Name Verification	accessed for a construction the reservoir was drawn on the reservoir was drawn on the control of	ion inspection. down for const to access the stion 3.1 (See instruct Sup. Engine Posit	ent and its agency portion work. Help dam. ctions) eer, W.R. DV tion/Title	urpose and use. s by boat, but this icopter travel VR/DSOD Department/Division
The dam needed to be was not possible since (approx. 10 minutes ea 3.3. Identify the officials was Name Last Name Verification	accessed for a construction the reservoir was drawn on the control of the control	ion inspection. down for const to access the stion 3.1 (See instruct Sup. Engine Posit	ent and its agency portion work. Help dam. ctions) eer, W.R. DV tion/Title	urpose and use. s by boat, but this icopter travel VR/DSOD Department/Division

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Payment to Agency Report

Payment to Agency Re	eport A Public	Document	PAYMENT TO AGENCY REPORT
1. Agency Name		Date	Stamp California 001
CA Department of Water Re	esources		Form OUI
Division, Department, or Reg	ion (if applicable)	- 15 ULU 2	J For Official Use Only
Division of Statewide Integra	ated Water Management		
Street Address	_		
901 P Street, Room 202, Sa	acramento, CA 95814		
Area Code/Phone Number	Email		
916-653-3937	kamyar.guivetchi@water.ca.go	ov —	Iment (explain in comment section)
Agency Contact (name and title)		Date of Ori	ginal Filing: 12/22/16 (month, day, year)
Kamyar Guivetchi, CEA, Div	vision Manager		(month, day, year)
2. Donor Name and Addre			
2. Donor Name and Addres	3S	Shinehu I	Iniversity Nagana Japan
☐ Individual	First Name	Other	Jniversity, Nagano, Japan
4-17-1 Wakasato	Nagano		Japan
Address	City		State Zip Code
Academia institute of high	ner education		
	s business activity (if business) or its nature a	and interests.	
	dentify the name of each source and	d the amount(s) received by the	ne donor for this payment:
	\$		5
Name	Amount	Name	Amount
3. Payment Information (C	omplete Sections 3.1 (a or	b), 3.2, 3.3)	
3.1 (a) Travel Payment	Tokyo & Nagano, Japan		11 / 12 - 19 / 2016
	Location of Travel		Dates (month, day, year)
JAL & Shinkansen	□ Rall □ Air □	Bus □ Auto □ Othe	Lohas, Chisun, Kiriya, Dormy
Transportation Provider	Check Applicat		Name of Lodging Facility
£ 625.00	200.002,130.0	00	2,955.00
\$ 625.00 \$. Lodging Expenses	Meal Expenses Transportation	on Expenses Other Expen	ses Total Expenses
3.1 (b) Payment(s) not rela	ated to travel:		\$ 2,955.00
, ,		Dates (month, day, year)	Total Expenses
3.2. Payment Description.	Provide a specific description	on of the payment and its	agency purpose and use.
Invited by Shinebu Univ	versity to present a Californ	nia Water Seminar en	11/15/2016, and attand
-			and university professors and
students between 11/1		gioriai water officials, a	and university professors and
3.3. Identify the officials w	ho used the payment in Secti	ion 3.1 (See instructions)	
Guivetchi	Kamyar	CEA, Division Manager	DWR / DSIWM
Last Name	First Name	Position/Title	Department/Division
Last Name	First Name	Position/Title	Department/Division
Labe Name	THIS TYPE THE	T COMOTIVING	Departmentoristori
			
I. Verification			
I authorized the acceptance	of the reported payment(s) as ir	n compliance with FPPC re	gulations.
No. of the case of	Gary Bardini	Deputy Director	12.73 11
Signature	Print Name	Tid	e (month, day, year)
Comment:			
(Use this space or an attachment for	r any additional information)		EPPC Form 801 (Jan/14)

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advice@fppc.ca.gov

Payment to Agency F	Report	A Public D	ocument		PAYME	NT TO AGENCY REPORT
1. Agency Name				Date Stamp	Ca	ifornia OO4
California Natural Resource	es Agency				F	orm OUI
Division, Department, or Re	gion (if applicable)		17.0	OFET -C	10.4	For Official Use Only
Department of Water Reso	ources - Division of Sa	afety of Dams				
Street Address						
2200 X Street, Suite 200,	Sacramento CA 958	18				
Area Code/Phone Number	Email					
916-227-9800	michael.waggoner	@water ca gov		Amendment (explain in comm	ent section)
Agency Contact (name and title		<u></u>		Date of Original F	iling: 🗦	2-17
Michael Waggoner, Chief,		anch			(moi	nth, day, year)
2. Donor Name and Addre				Dooific Coo 9 E	laatria Cam	non (DC 9 E)
☐ Individual N/A Last Name	N/A First N		☑ Other	Pacific Gas & E	Name	pany (PG&E)
PO Box 770000	First N	San Francisco	n	С		4177
Address		City	-	Sta		Code
Power Generation						
If "Other" is marked, describe the entit	v's business activity (if busines	s) or its nature and in	terests			
	,	,				
If applicable,	identify the name of each	ch source and the	e amount(s) re	eceived by the don		
N/A	\$ 0.00		N/A			\$ 0.00
Name		Amount		Name		Amount
3. Payment Information (Complete Sections	3.1 (a or b),	3.2, 3.3)			
3.1 (a) Travel Payment	Amador, Alpine	, Tuolumne		10	/25, 10/31,	(2016)
ì	Lo	cation of Travel			Dates (m	onth, day, year)
PG&E		☑ Air □ B	us ⊟ Auto	Other N/	Ά	
Transportation Provider		Check Applicable B		_	Name of I	odging Facility
© 0.00	_{\$} Ω.00	_ 1,000.00	œ.	0.00	1,0	00.00
Lodging Expenses	Meal Expenses	Transportation Ex	rpenses Ψ-	Other Expenses	Ψ <u>Τ</u>	otal Expenses
3.1 (b) Payment(s) not re	elated to travel:		N/A	\$ 0.	00	
			Dates (month, d	fay, year)	Tota	I Expenses
3.2. Payment Description	n. Provide a specific	description o	of the payme	ent and its agen	cy purpose	and use.
Helicopter travel was	offered by PG&E	to expedite tr	ravel to joir	ntly inspect da	ms in rem	ote areas
under State jurisdictio	n for dam safety.	The use of a	helicopter	is more efficie	ent for bot	h
organizations and is g	enerally a safer m	node of trans	portation to	o dams with lir	nited road	access.
3.3. Identify the officials	who used the paym	ent in Section	3.1 (See instruc	ctions)		
Dhillon	Param		Senior Engli		DWR/DS	חח
Last Name	First Name			tion/Title		artment/Divisjon
233, 113,113	T Wat I Tallio		. 001		Бор	avancino Breajeri
Last Name	First Name		Posi	ition/Title	Dep	artment/Division
4. Verification	_					
I authorized the acceptance	a of the reported povr	ment(s) as in co	mnliance wit	th EDBC regulation	one	
raumonized the acceptance	and the second s	// as in co			J115.	1010
MIChael Warn	Michael	Na 9 4 offe	Field	Branch Chie	T	1/3//17
Signature //	P	All Caralles		Title		(month, day, year)
Comment:						
(Use this space or an attachment	for any additional informat	ion)				PC Form 801 (Jan/14)
					171	advice@fppc.ca.gov

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. Agency Name	Report A Pul	olic Documen	L	PAYMENT TO AGENCY REPOR
goney manie			Date Stamp	California O O 4
California Natural Resou	irces Agency		OW.	Form OU
Division, Department, or F	Region (if applicable)		TOTE OCT LO AVA	For Official Use Only
Department of Water Re	sources - Division of Safety of	Dams	2016 OCT 19 AH 6	30
Street Address			1	
2200 X Street, Suite 200	, Sacramento, CA 95818			
Area Code/Phone Number				
916-227-9800	michael.waggoner@water	ca dov	Amendment (explain	in comment section)
Agency Contact (name and til	50 0		Date of Original Filing:	10-19-16
	of, Field Engineering Branch			(month, day, year)
		· ·		
. Donor Name and Add			Danifia Can 9 Florida	Carrer (DORE)
☐ Individual N/A Last Name	N/A		Pacific Gas & Electric	
PO Box 770000	First Name	rancisco	CA	Name 94177
Address	City		State	Zip Code
Power Generation	2.1,			- F
	ntity's business activity (if business) or its na	ture and internets		
ii Otilei is iligikçu, describe ille eli	Titly 3 business activity (ii business) of its ris	tare and interests.		
	e, identify the name of each source	e and the amount(s)	received by the donor for	this payment:
N/A	\$ 0.00	N/A		0.00
Name			Name	Amount
	Rail 🗸 Air	☐ Bus ☐ Au	to □ Other ^{IN/A}	
Helicopter travel was under State jurisdicti	\$\frac{0.00}{Meal Expenses} \frac{\frac{1}{3}}{\frac{1}{1},0}\$ related to travel: on. Provide a specific description of the specific descrip	edite travel to joi e of a helicopte	O.00 Other Expenses \$ 0.00 day, year) tent and its agency put intly inspect dams it	n remote areas or both
\$\frac{0.00}{\text{Lodging Experises}}\$ 3.1 (b) Payment(s) not 3.2. Payment Description Helicopter travel was under State jurisdiction organizations and is	\$\frac{0.00}{Meal Expenses} \frac{\frac{1}{3}}{\frac{1}{1},0}\$ related to travel: on. Provide a specific description of the specific description of the specific description for dam safety. The use generally a safer mode of	on on one of the payment of the of a helicopte of transportation	O.00 Other Expenses \$ 0.00 day, year) ment and its agency put intly inspect dams it is more efficient for to dams with limited	Total Expenses Tropose and use. Tremote areas or both
\$\frac{0.00}{Lodging Expenses}\$ 3.1 (b) Payment(s) not 3.2. Payment Description Helicopter travel was under State jurisdiction organizations and is 3.3. Identify the officials	\$\frac{0.00}{Meal Expenses}\$\frac{\frac{1}{0}}{\frac{1}{1}}\$\frac{\frac{1}{0}}{\frac{1}{0}}\$\frac{1}{0}\$\frac{1}{0}\$\frac{1}{0}\$\frac{1}{0}\$\frac{1}{0}\$\frac{1}{0}\$\frac{1}{0}\$\frac{1}{0}\$\text{ransp}\$\text{con.} Provide a specific description of the specific description of t	on on on one of the payment of a helicopte of a helicopte of transportation of the payment of th	O.00 Other Expenses \$ 0.00 day, year) Hent and its agency put intly inspect dams in is more efficient for to dams with limited	Total Expenses Tropose and use. Tremote areas or both I road access.
\$\frac{0.00}{\text{Lodging Expenses}}\$ 3.1 (b) Payment(s) not 3.2. Payment Description Helicopter travel was under State jurisdiction organizations and is 3.3. Identify the officials Jimenez	\$\frac{0.00}{Meal Expenses}\$\frac{1,0}{franspi}\$ related to travel: on. Provide a specific description of the	on on one of the payment of the of a helicopte of the payment of t	O.00 Other Expenses \$ 0.00 day, year) ment and its agency put intly inspect dams it r is more efficient for to dams with limited suctions) W.R. DW	Total Expenses Trotal Expenses Irpose and use. To remote areas or both I road access.
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\$\frac{0.00}{\text{Lodging Expenses}}\$ 3.1 (b) Payment(s) not 3.2. Payment Description Helicopter travel was under State jurisdiction organizations and is 3.3. Identify the officials Jimenez	\$\frac{0.00}{Meal Expenses}\$\frac{1,0}{franspi}\$ related to travel: on. Provide a specific description of the	on on one of the payment of the paym	O.00 Other Expenses \$ 0.00 day, year) ment and its agency put intly inspect dams it r is more efficient for to dams with limited suctions) W.R. DW	Total Expenses Total Expenses Irpose and use. To remote areas or both I road access.
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\$\frac{0.00}{Lodging Expenses}\$ 3.1 (b) Payment(s) not 3.2. Payment Description Helicopter travel was under State jurisdiction organizations and is 3.3. Identify the officials Jimenez Last Name Last Name	\$\frac{0.00}{Meal Expenses} \frac{\frac{1}{3}}{\frac{1}{1},0} \frac{\frac{1}{1}}{\frac{1}{1}} \text{ransp} \text{related to travel:} on. Provide a specific description for dam safety. The using generally a safer mode of the payment in State	printion Expenses N/A Dates (month, prior of the payment) edite travel to joint the prior of a helicopte of a helicopte of transportation of the payment	Other Expenses \$ 0.00 day, year) tent and its agency putintly inspect dams in the dams with limited to dams with limited auctions) W.R. DW sition/Title	Total Expenses Total Expenses Irpose and use. Ir remote areas or both I road access. R/DSOD Department/Division
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