Payment to Agency Report

A Public Document

PAYMENT TO AGENCY REPORT

California Form 801

For Official Use Only

Date Stamp

1. Agency Name

California Department of Insurance

Division, Department, or Region (if applicable)

Street Address

300 Capitol Mall, 16th Floor

Area Code/Phone Number

(916) 610-2034

Email

Kathryn.Taras@insurance.ca.gov

Agency Contact (name and title)

Kathryn Taras, Manager II

☐ **Amendment** (explain in comment section)

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

2. Donor Name and Address

☐ Individual _____ Last Name _____ First Name

■ Other National Association of Insurance Commissio Name

1100 Walnut Street, Suite 1500 Address | Kansas City City | MO State | 64108 Zip Code

(See Attachment One)

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

(See Attachment Two) Location of Travel | _____ Dates (month, day, year)

_____ Transportation Provider ☐ Rail ☐ Air ☐ Bus ☐ Auto ☐ Other Check Applicable Boxes | _____ Name of Lodging Facility

$_____ Lodging Expenses $_____ Meal Expenses $_____ Transportation Expenses $_____ Other Expenses $_____ Total Expenses

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.

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

_____ Last Name _____ First Name _____ Position/Title _____ Department/Division

_____ 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.

Digitally signed by Martinez, Michael
Date: 2026.11.06 10:40:53 -08'00'
Signature

Michael Martinez Print Name | Chief Deputy Commissioner Title | 11/06/26 (month, day, year)

Comment:

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

Clear Page Print Form

Payment to Agency Report Instructions

A Public Document

California Form 801

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 3050, 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.

(Attachment One)

California Form 801

The National Association of insurance Commissioners (NAIC) is the U.S. standard-setting and regulatory support organization created and governed by the chief insurance regulators from the · 50 states, the District of Columbia and five U.S. territories. Through the NAIC, state insurance regulators establish standards and best practices, conduct peer review, and coordinate their regulatory oversight. NAIC staff supports these efforts and represents the collective views of state regulators domestically and internationally. NAIC members, together with the central resources of the NAIC, form the national system of state-based insurance regulation in the U.S.

California, as the largest insurance market in the nation, plays a significant role in helping shape NAIC model laws and regulatory policy. Doing so involves active participation in NAIC National Meetings and conference calls with regulators from other states. In this regard, California serves as Chair, Vice Chair and/or Member on approximately 80 out of the 121 NAIC Committees, Task Forces and Working Groups, and actively monitors the approximately 41 other bodies.

(Attachment Two)

National Association of Insurance Commissioners (NAIC) Meeting Payment Information

Entry Number: 1
Meeting or Event Name/Location: 2021 Diversity, Equity and Inclusion Annual Conference (Kansas City, MO)
Travel Dates: Jun 8-10, 2021
Official's Department/Division: Ricardo Lara, Insurance Commissioner
Transportation Provider: United Airlines
Airfare: $486.68
Lodging: Loews Kansas City Hotel, $378.00
Meals: $282.17
Other Expenses: $0.00
Total Expenses: $660.17

Total Department Expenses: $1,146.85