

Payment to Agency Report

A Public Document

PAYMENT TO AGENCY REPORT

1. Agency Name
Alameda County Employees' Retirement Association (ACERA)
Division, Department, or Region (if applicable)
Alameda County
Street Address
475 14th Street, Suite 1000, Oakland, CA 94612
Area Code/Phone Number (510) 628-3000
Email info@acera.org
Agency Contact (name and title) Vincent P. Brown, ACERA CEO
Date Stamp
California Form 801 For Official Use Only
Amendment (explain in comment section)
Date of Original Filing: (month, day, year)

2. Donor Name and Address
Milken Institute
Other
Last Name First Name Name
1250 Fourth Street Santa Monica CA 90401
Address City State Zip Code
A non-profit organization advancing innovative economic and policy solutions and widen access to capital.
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:
Not Applicable \$ Name \$ Amount

3. Payment Information (Complete Sections 3.1 (a or b), 3.2, 3.3)
3.1 (a) Travel Payment
Not Applicable
Location of Travel April 27-30, 2014
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)
See Attached
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.
Signature Vincent P. Brown Chief Executive Officer 04/28/14
(month, day, year)
Comment: Milken Global Conference
(Use this space or an attachment for any additional information)



**Attachment to California FPPC Form 801 for
Alameda County Employees' Retirement Association (ACERA)**

Attendee Name:	Amount paid for the attendee (reflective of discount):	Conference price (without discount):	Dates of conference:
Vincent P. Brown	\$6,500 (per person)	\$12,500 (per person)	April 27-30, 2014
Dale Amaral	\$6,500 (per person)	\$12,500 (per person)	April 27-30, 2015
Annette Cain-Darnes	\$6,500 (per person)	\$12,500 (per person)	April 27-30, 2016
Keith Carson	\$6,500 (per person)	\$12,500 (per person)	April 27-30, 2017
Total:	\$26,000	\$50,000	