

SEE INSTRUCTIONS ON BACK OF LAST COPY

REFER TO THIS ORDER BY
SUB-PURCHASE ORDER NUMBER

STATE OF CALIFORNIA—GENERAL SERVICES PROCUREMENT DIVISION

SUB-PURCHASE ORDER

STD. 40A (REV. 6-2001c)

| | |
|---|---------------------------|
| SUB-PURCHASE ORDER NUMBER SPO-05-067 | TOTAL PAGES THIS ORDER: 1 |
| DATE 9/22/05 | |
| VENDOR'S INVOICE NUMBER (IF ANY) | |
| CERTIFICATION: I hereby certify that this is a true and just bill and payment has not been received. | |
| VENDOR'S SIGNATURE | |
| TITLE (OWNER, MGR., CLERK, ETC.) | |

NOTICE TO VENDOR

- FURNISH DATA FOR ALL ITEMS OUTLINED IN HEAVY RULE IF NOT ALREADY COMPLETED BY AGENCY.
- ALL SHIPMENTS TO BE "F.O.B. DESTINATION PREPAID," UNLESS OTHERWISE SPECIFIED.
- SEE ADDITIONAL INSTRUCTIONS ON Will you bill separately? (CHECK ONE)
(If yes, bill in triplicate; if no, sign certification and return per instructions.)
YES NO

SHIP TO: State Coastal Conservancy
1330 Broadway, Ste. 1100
Oakland, CA 94612
Attn: Elena Eger

CHARGE TO: State Coastal Conservancy
1330 Broadway, Ste. 1100
Oakland, CA 94612
Attn: Accounts Payable

LAW OFFICES OF
GAINES & STACEY
16633 VENTURA BLVD., STE. 1150
ENCINO, CA 91436-1865
ATTN: ALICIA B. BARTLEY

VENDOR NOTE: THIS IS A SELF INVOICING
FORM - NO SEPARATE INVOICE NEEDED.

FEDERAL EMPLOYER IDENTIFICATION NUMBER
95-4640351

DATE WANTED

| LINE NO. | QUANTITY | UNITS (LBS., DOZ., GALS., ETC.) | DESCRIPTION (COLOR, SIZE, PART NO., ETC.) | (X) | UNIT PRICE | AMOUNT |
|----------|----------|---------------------------------|---|-----|------------|--------|
| 1. | | | Public Records Request Act reimbursement for difference owed from | | | 84 92 |
| 2. | | | initial deposit (\$650.00) to cover copy costs and mailing. | | | |
| 3. | | | | | | |
| 4. | | | Re: Lechuza Beach | | | |
| 5. | | | | | | |
| 6. | | | | | | |
| 7. | | | | | | |
| 8. | | | | | | |
| 9. | | | | | | |
| 10. | | | | | | |
| 11. | | | | | | |

| | | | | |
|--|---|---|------------------|-------|
| FISCAL YEAR 05/06 | CONTRACT OR STATE PRICE SCHEDULE NUMBER | I hereby certify, on personal knowledge that this order for purchasing the items specified above is issued in accordance with the procedure prescribed by law governing the purchase of such items for the State of California; that all such legal requirements have been fully complied with. | SUB TOTAL | 84 92 |
| NAME OF FUND AND ALLOTMENT (COMPLETION OPTIONAL) SCC Fund of '76 3760-001-0565, chap. 38 | | | TRADE DISCOUNT % | |
| ALLOTMENT CODING 1000/239/96150 | | AUTHORIZING SIGNATURE | SUB TOTAL | 84 92 |
| ADDITIONAL EXPENDITURE CODING printing GE | | TITLE Administrative Officer | SALES TAX | |
| CLAIM NUMBER | | AMOUNT | TOTAL | 84 92 |
| SIGNATURE OF RECEIVER | | CASH DISCOUNT % | DAYS | |
| DATE RECEIVED | | PURCHASED UNDER S.A.M. 3571.1(2) | A B C D E | |

DISTRIBUTION COPIES: 1-INVOICE; 2-VENDOR'S COPY; 3-PACKING SLIP; 4, 5, 6-MISCELLANEOUS; 7-ORIGINATING UNIT

| | | |
|---|---|--|
| Intra-Office Requisition (IOR) | | CDO / DB / <u>(SPO)</u> #: (circle one) |
| Name of Vendor: <u>Gaines & Stacey, LLP</u> | | <u>SPO-05-067</u> |
| Address: <u>116633 Ventura Blvd. Ste. 1150</u> <u>Encino, CA. 91436-1865</u> | | Issued Date: <u>9/22/05</u> |
| Phone No. <u>818-593-6355</u> | | Note: Please allow 4 hours for SPO number (\$99 and under) and 1 day for a CDO number (\$100 and above) after submitting your request. |
| Contact person: <u>Alicia B. Bartley</u> | | |
| Small Business: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Federal Tax I.D No. (except Government) | Check One: <input checked="" type="checkbox"/> Partnership <input type="checkbox"/> Corporation |
| DVBE: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | <input type="checkbox"/> Non-Profit <input type="checkbox"/> Government |
| Certification # _____ | <u>95-4640351</u> | <input checked="" type="checkbox"/> Sole Proprietorship (Required SS#) |
| Vendor Name: _____ | | |

| Quantity | Description/Specification | Unit Price | Amount |
|---|---|------------------|---------------------------|
| | <u>Difference from Deposit and Actual Copy Costs.</u> | | <u>84.92</u> |
| | <u>Re: Public Records Request</u> | | |
| | <u>Lechuza Beach</u> | | |
| | <u>Contact: Elena Eger.</u> | | |
| | <u>(Gaines + Stacey - Check # 002359, \$650.00)</u> | | |
| | <u>Rec'd 9/12/05 @ SCC.</u> | | |
| | <u>RA: DG200504</u> | Shipping/Handing | |
| | | Subtotal | <u>84.92</u> |
| | | Sales Tax | |
| NEED REVOLVING CHECK ISSUED? BLUE FORM REQUIRED. | | | Total <u>84.92</u> |

| | |
|---|--|
| Check One: <input type="checkbox"/> Commodity <input checked="" type="checkbox"/> Service | Requested By: |
| Name of Project: <u>Administration</u> | <u>Anna Schneider</u> Signature |
| Funding Source | Approved By: |
| Fund Title: <u>SCC Fund of '76</u> | <u>Res. Dennis</u> Supervisor's Signature |
| Budget Item: <u>3760-001-0565</u> Chapter: <u>38</u> Fiscal Year: <u>05/06</u> | |
| Object of Expenditure: <u>Printing GE</u> | |

REQUEST FOR FUNDS

REQUEST FOR (Check One)

| | | | |
|--|--|--|------------------------------------|
| <input type="checkbox"/> Publication(s) and Subscription | <input type="checkbox"/> Conference/Training | <input type="checkbox"/> Petty Cash Fund Reimbursement | Reference No. <i>SP0-05-067</i> |
| <input type="checkbox"/> Postage Meter Refill | <input type="checkbox"/> Transit | <input type="checkbox"/> Other (Describe below) | Date <i>9/22/05</i> |

| | |
|--|-------------------------------------|
| Name of Payee <i>Gaines & Stacey, LLP</i> | AMOUNT REQUESTED <i>\$ 84.92</i> |
|--|-------------------------------------|

Advance in the above amount is requested for the following reason:

Difference between deposit of \$650.00 and actual copy/mailing costs.

(9/22/05 RA: DG200504)

**Please mail check w/enclosed cover letter.*

| | | |
|------------------------------------|------|---|
| FOR ACCOUNTING USE | | Requested by <i>Anna Schneider</i> Employee's Signature |
| Revolving Fund Check Record | | Approval Recommended _____ Immediate Supervisor |
| Number | Date | |
| Claim Schedule No. | | Request Approved <i>Rohms</i> Division Approval |
| GAIS STARS Coding | | Request Authorized <i>Hongle Thong</i> Accounting Officer |

FRED GAINES
SHERMAN L. STACEY
LISA A. WEINBERG*
REBECCA A. THOMPSON
NANCI SESSIONS-STACEY
KIMBERLY A. RIBLE
ALICIA B. BARTLEY
** a professional corporation*

LAW OFFICES OF
GAINES & STACEY LLP
16633 VENTURA BOULEVARD, SUITE 1150
ENCINO, CA 91436-1865

TELEPHONE (818) 593-6355
(310) 394-1163
FACSIMILE (818) 593-6356
INTERNET: WWW.GAINESLAW.COM

September 9, 2005

ORIGINAL SENT BY U.S. MAIL

VIA FACSIMILE (510) 286-0470

Elena Eger
Coastal Conservancy
1330 Broadway, 11th Floor
Oakland, CA 94612-2530

Y900

Re: Public Records Act Request
Lechuza Beach

Dear Ms. Eger:

This letter responds to your letter dated September 7, 2005 regarding our Public Records Act Request for documents pertaining to the Mountains Recreation and Conservation Authority's acquisition of the certain property at Lechuza Beach. Thank you for clarifying the Coastal Conservancy's role in that acquisition.

Enclosed please find a check in the amount of \$650.00 for our deposit to cover the cost of copying the documents that the Conservancy's staff has identified that are responsive to our request. Please forward the copies to our office using regular mail.

As always, please do not hesitate to contact me at any time with any questions or comments you may have.

Sincerely,

GAINES & STACEY LLP

By 
ALICIA B. BARTLEY

RECEIVED

SEP 12 2005

COASTAL CONSERVANCY
OAKLAND, CALIF.

file



FILE COPY

September 22, 2005

Law Offices Of
Gaines & Stacey, LLP
16633 Ventura Blvd., Ste. 1150
Encino, CA 91436-1865

Re: Public Records Request
Lechuza Beach

Dear Ms. Bartley:

Enclosed are the public records that you requested. The copying fees totaled \$546.39 and mailing fees were \$18.69. The difference that we owe you is \$84.92. Please allow 2-3 weeks for a check to be processed. If you have any questions, please do not hesitate to contact this office.

Sincerely,
Anna Schneider
Anna Schneider, Office Technician
State Coastal Conservancy

Enc. Copies of public records
Kwik Kopy receipt

cc. Elena Eger

1330 Broadway, 11th Floor
Oakland, California 94612-2530
510-286-1015 Fax: 510-286-0470



Public Records Request (Elena Eger)
 - hechuza Beach.

file

To Law Offices: Gaines & Stacey, LLP
 Encino, CA.

FILE COPY



416-14th Street
 Oakland, CA 94612
 Tel: (510) 763-4532
 Fax: (510) 763-6978

18985

PAGE _____ OF _____

DATE 9-20-05 PROMISED _____ TIME _____ CUST. P.O. # SP0-05-001 TAKEN BY _____
 FOR State Coastal Conservancy
 ADDRESS _____

PHONE _____ BY _____

DESCRIPTION _____

FINISHED SIZE (AFTER CUT) _____ RUN SIZE _____

| PRESS SHEETS | SIDES | | NO. ORIG. | SIZE | | WT. | COLOR | |
|--------------|--------|---|-----------|------------|------------|-----|-----------|-----------|
| | 1 | 2 | | 8 1/2 x 11 | 8 1/2 x 14 | | | |
| 4960 | copies | | 3 | 4 | oversized | | | \$ 502.43 |
| | | | | | collated | | 3 stapled | |

- SPECIAL STOCK _____
- COMPOSITION
- COLOR INK _____
- REPROS
- METAL PLATES @ _____/EA.
- NEGATIVES OR VELOX @ _____/EA
- CUTTING & TRIMMING CUT _____ RUN SIZE
- CUT _____ FIN. SIZE
- DRILL _____
- PERFORATE SCORE
- FOLD _____
- PAD _____
- GATHER
- BINDING _____
- NUMBER _____
- OTHER _____

SUB-TOTAL \$ 502.43
 TAX 43.96
 TOTAL \$ 546.39
 DEPOSIT/D.D. _____
 BALANCE \$ _____

Received by [Signature] Date 9/20

Paid: cash check credit

Internet Shipping: Shipment Receipt

Public Records Request.

- Elena Eger

Re: Lechuzza Beach.

Shipment Receipt

Keep this for your records.)

Transaction Date 22 Sep 2005

Address Information

Ship To: Aines & Stacey, LLP, Alicia B. Bartley, 5633 Ventura Blvd., Ste. 1150, NCINO CA 91436-1818

Shipper: State Coastal Conservancy, Elena Eger, 510-286-1015, 1330 Broadway, Suite1100, OAKLAND CA 94612

Ship From: State Coastal Conservancy, SCC Admin, 510-286-1015, 1330 Broadway, Suite1100, Oakland CA 94612

FILE COPY

Shipment Information

Service: UPS Ground Service, Guaranteed By: End of Day, Mon. 26 Sep. 2005

*** UPS On-Call Pickup®: Shipment Ready at: September 22, 2005 4:00 PM, Pick Up by: September 22, 2005 5:00 PM, Request Number: 2029094JL60

Shipping: **18.69

Package Information

Package 1 of 1, Tracking Number: 1ZF760R10399859164, Package Type: Your Packaging, Dimensions: 18 x 12 x 10 in., Actual Weight: 48.0 lbs, Billable Weight: 48.0 lbs

Billing Information

Payment Method: Bill Sender: F760R1, Total: All Shipping Charges in USD **18.69

Note: The displayed rate is for reference purposes and does not include applicable taxes.

For delivery and guarantee information, see the UPS Service Guide. To speak to a customer service representative, call 1-800-PICK-UPS for domestic services and 1-800-782-7892 for international services.

* Rate includes a fuel surcharge.

**Shipment Pickups outside of normal service areas are subject to an additional surcharge not reflected in the standard Pickup Charge

Note: The transportation charges include all applicable pickup costs.

Responsibility for Loss or Damage

Unless a greater value is recorded in the declared value field as appropriate for the UPS shipping system used, the shipper agrees that the released value of each package covered by this receipt is no greater than \$100, which is a reasonable value under the circumstances surrounding the transportation. If additional protection is desired, a shipper may increase UPS's limit of liability by declaring a higher value and paying an additional charge. UPS does not accept for transportation and shipper's requesting service through the Internet are prohibited from shipping packages with a value of more than \$50,000. The maximum liability per package assumed by UPS shall not exceed \$50,000, regardless of value in excess of the maximum. Claims not made within nine months after delivery of the package (sixty days for international shipments), or in the case of failure to make delivery, nine months after a reasonable time for delivery has