



**COUNTY OF LOS ANGELES
DEPARTMENT OF CHILDREN AND FAMILY SERVICES**

425 Shatto Place - Los Angeles, California 90020
(213) 351-5602

ANITA M. BOCK
Director

**BOARD OF SUPERVISORS:
GLORIA MOLINA
YVONNE BRATHWAITE BURKE
ZEV YAROSLAVSKY
DON KNABE
MICHAEL D. ANTONOVICH**

September 11, 2001

The Honorable Board of Supervisors
County of Los Angeles
383 Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, CA 90012

Dear Supervisors:

DONATIONS IN EXCESS OF \$10,000

During the months from January 2001 through March 2001, the following donations were received by the Department of Children and Family Services. I have attached a listing of the various donations.

IT IS THEREFORE RECOMMENDED THAT YOUR BOARD:

Accept these donations for the Department of Children and Family Services and send letters of appreciation to the donors.

Respectfully submitted,

A handwritten signature in cursive script that reads "Anita Bock".

ANITA M. BOCK

Director

AMB:EJ:SS:
MCQ:jo

Attachment

c: Chief Administrative Officer
County Counsel
Auditor-Controller

ATTACHMENT I

DESCRIPTION OF DONATIONS	DONOR	ESTIMATED VALUE
Presents for children	The Walt Disney Company Attention: Candice Moore Repr. Community Relations 500 South Buena Vista Street Burbank, CA 91521	252,366.00
Assorted gift, 550 items, Incl. bicycles, toys, special clothing, gift certificates	Self-Realization Fellowship-Lake Shrine Attention: Mary Delahante 17190 Sunset Boulevard Pacific Palisades, CA 90272	44,305.00
Presents for children (1350 @ \$25.00)	United Parcel Services Attention: Mr. Paul Tellez 3121 E. Jurupa Ontario, CA 91761	33,750.00
Christmas presents for 500 children and 150 adults	United Parcel Service Attention: Mr. Paul Tellez 3121 E. Jurupa Ontario, CA 91761	30,000.00
999 Party for Kids	999 Sheriff's Party Attention: Capt. Pete Amico 11515 So. Colima Whittier, CA 90604	30,000.00
1000 Assorted toys	Fire Station 73 Attention: Steve Brock 24875 San Fernando Road Santa Clarita, CA 91321	20,000.00
850 Assorted gifts	Lockheed Aeronautics Company Attention: Mr. Rick Baker 1011 Lockheed Way Palmdale, CA 93599	17,000.00

ATTACHMENT I

DESCRIPTION OF DONATIONS	DONOR	ESTIMATED VALUE
18 computers with monitors	Todd Pipe & Supply Attention: Mr. Dave Webster General Manager 4828 W. 145th Street Hawthorne, CA 90251	15,000.00
500 Assorted wall plaques	Mount Gleason Fire Camp Attention: Mr. John Solis 22271 Bogie Street Tehachapi, CA 93551	10,000.00
	Total	\$452,421.00 =====

DEPARTMENT OF CHILDREN AND FAMILY SERVICES DONATION RECEIPT

Taken by: Walter Chan
Date: 12/5/00

PART I (DONOR INFORMATION) Completed by DCFS staff.

Name of Organization or Individual (Please Print): The Walt Disney Company
Contact Person: Candice Moore, Community Relations Telephone No.: (818) 560-1000
Address: 500 South Buena Vista Street
City: Burbank State: CA Zip Code: 91521

PART II (TYPE OF DONATION) DCFS staff complete one of the boxes below:

A. Financial (Check one) N/A
1. Restricted [] 2. Unrestricted [X]
Check Amount \$.00
Cash Amount \$.00
Total Amount \$.00
Deposit Account/Sub-Account Title:
* Take Cash/Check immediately to Finance/ Cash Management Unit for Deposit.

B. In-Kind or Service (Check one)
1. Restricted [] 2. Unrestricted [X]
Estimated Value \$252,366.00
Description: See attached - various gift items

If restricted, please list/describe restrictions:

Acknowledgement letter is [X] is not [] requested from receiving party.

PART III (IN-KIND DONATION TRANSFER) Completed by DCFS staff.

Transferred to (Name) Telephone No.:
Bureau/Region
Directions for Pickup

PART IV (IN-KIND DONATION TRANSFER) Completed by DCFS staff receiving transfer.

Regional Contact Person Telephone No.:
Bureau/Region
Items Received (Number & Description):

Received By: Telephone No.:
(Print name)
(Signature) (Date Received)

Distribution: Original to DCFS Finance Office Donation-gen-dona-disney
Copy to DCFS Receiving Bureau/Region
Copy to Donor (to be sent with acknowledgement letter)



**COUNTY OF LOS ANGELES
DEPARTMENT OF CHILDREN AND FAMILY SERVICES**

425 Shatto Place - Los Angeles, California 90020
(213) 351-5602

ANITA M. BOCK
Director

BOARD OF SUPERVISORS:
GLORIA MOLINA
YVONNE BRATHWAITE BURKE
ZEV YAROSLAVSKY
LARRY KNABE
MICHAEL D. ANTONOVICH

February 27, 2001

Ms. Candice Moore
Representative, Community Relations
The Walt Disney Company
500 South Buena Vista Street
Burbank, CA 91521

Dear Ms. Moore,

A tremendous "Thank You" for the donation by the Walt Disney Company, one of the most generous the Department of Children and Family Services has ever received. The thousands of gift items received by the children and families served by DCFS made the Year 2000 Holiday Season most joyous.

Enclosed are your signed tax forms and a letter from the Los Angeles County Auditor Controller regarding donor tax information.

The Walt Disney Company donation will be highlighted in an upcoming issue of the Departmental Newsletter that I will send you. Additionally, when it's convenient for you, I'd like to meet or speak with you to learn how else we may recognize the Walt Disney Company, you and your staff for this great donation.

Again, many thanks.

Sincerely,

A handwritten signature in black ink that reads "Walter Chan".

Walter Chan
Director, Trust Fund and Fundraising Finance

WC:jd
Enclosures



COUNTY OF LOS ANGELES
DEPARTMENT OF AUDITOR-CONTROLLER

525 HALL OF ADMINISTRATION
LOS ANGELES, CALIFORNIA 90012
(213) 974-8301

MARK H. BLOODGOOD
AUDITOR-CONTROLLER

DANIEL O. IKEMOTO
CHIEF DEPUTY AUDITOR-CONTROLLER

October 3, 1988

Donors to
Los Angeles County

Gifts to Los Angeles County

Los Angeles County is a chartered county and, as defined by the California Government Code, Section 23000, is a political subdivision of the State of California. Section 17214(a) of the California Revenue and Taxation Code states, in part, that in computing taxable income there shall be allowed as a deduction, contributions or gifts to or for the use of the United States, any state or any political subdivision thereof. Los Angeles County's California tax identification number is 800-9593-8.

Los Angeles County is exempt from federal income tax as defined by Section 501(c)(1) of the Internal Revenue Code. Section 170(a) and (c)(1) of the Internal Revenue Code effectively provide for a deduction for any contribution or gift to or for the use of a State, a possession of the United States, or any political subdivision of any of the foregoing. Los Angeles County's federal identification number is 95-6000-927.

Sincerely,

Mark H. Bloodgood
Auditor-Controller



The **WALT DISNEY** Company

January 16, 2001

Ms. Susan Jakubowski
Department of Children and Family Services
425 Shatto Place, 6th Floor
Los Angeles, CA 90020

Dear Ms. Jakubowski:

On behalf of The Walt Disney Company, we were very pleased to make a donation of Disney character merchandise for your Christmas program.

We ask that these items go directly to needy families and children as gifts. As you know, the images of our characters are licensed to a variety of different manufacturers, including those companies who have created the items we are now contributing to your efforts. In accordance with corporate policy, donated Disney merchandise may not be sold for fundraising purposes, or for any reason. We hope you will understand this stipulation and our reasons for making it.

Our company policy requires that the enclosed forms be filled out by the recipients of our merchandise. Therefore, would you please complete the three forms in the places indicated by the "X" and return them to me as soon as possible in the self-addressed envelope. Note: It is important that the forms be signed by the person(s) authorized to do so by your organization. In order for us to consider your organization for a donation in 2001, we must receive these tax forms back no later than February 30, 2001.

We are happy to support your worthwhile efforts on behalf of those less fortunate in our communities and we extend our best wishes to you for continued success in the New Year.

Sincerely,

A handwritten signature in black ink that reads "Candice Moore". The signature is written in a cursive, flowing style.

Candice Moore
Representative,
Community Relations

Enclosures

© 2001 Walt Disney World Company. All Rights Reserved.

Merchandise Receipt / Pick List

Organization **Department of Children and Family Services**

Address **425 Shatto Place, 6th Floor
Los Angeles CA . 90020**

Group **7**

Boxes	Item	Total Price
66	Audio	\$15,840.00
166	Child's Mugs	\$7,968.00
56	Misc. Infant Clothes	\$49,280.00
416	Beanie Toys	\$39,936.00
166	Bubble Pens	\$3,984.00
200	Books	\$70,000.00
41	Misc. Adult Clothes	\$,648.00
83	Toy Buggy	\$9,960.00
45	Misc. Children's Clothes	\$33,750.00

Total Boxes 1239

Grand Total Price

\$252,366.00



CONTRIBUTION ACKNOWLEDGMENT

Pursuant to IRC Section 170(f)(8), please submit the following information regarding cash or merchandise contributions received from The Walt Disney Company. Fully complete each item listed below, including signature and date, and return the original copy to Disney in the self-addressed envelope provided. Please make a copy for your own records. Thank you for your assistance.

1. Name of Recipient Organization: Department of Children and Family Services
2. Date of contribution: 12/15/2000
3. Description of contribution: see attached
4. Describe any goods or services provided to The Walt Disney Company in exchange for the contribution: NONE
5. Please provide a description and good faith estimate of the value of the goods and/or services provided to The Walt Disney Company as described in item #4:

\$252,366.00

X Walter Chastain
Signature of Representative
of Recipient Organization

X 2/27/01
Date



Statement Pursuant to Internal Revenue Regulation Section 1.170A-4A(b)(4)

Pursuant to Internal Regulation Section 1.170A-4A(b)(4), we hereby submit the following information regarding contributions of property received from The Walt Disney Company (or affiliate thereof) during the twelve month period ending September 30, 2001.

Name of recipient organization: Department of Children and Family Services

Date contribution received: 12/15/2000

Description of property: See Attached, \$252,366.00

Representation:

1. We represent that the donated property will be used in a manner related to the purpose or function constituting the basis for our exemption under Internal Revenue Code (IRC) Section 501, that the property will be used solely for the care of the ill, needy, or infants, and that the property will not be transferred in exchange for money, other property or service, except as provided under Regulation Section 1.170A(b)(3)(ii).
2. We represent that we are in an organization described in IRC section 501(c)(3) and are exempt under Section 501(a) (other than a private foundation, as defined in IRC Section 509(a), which is not an operating foundation, as defined in Section 4942(j)(3)).
3. We represent that adequate books and records will be maintained and made available to the Internal Revenue Service upon request.

X Walter Chan
Signature of Representative

X 2/27/01
Date

X WALTER CHAN
Name of Representative (PLEASE PRINT)

Name(s) shown on your income tax return

The Walt Disney Company and Consolidated Subsidiaries

Identifying number

95-068440

Section B—Appraisal Summary— List in this section only items (or groups of similar items) for which you claimed a deduction of more than \$5,000 per item or group. **Exception.** Report contributions of certain publicly traded securities only in Section A.

If you donated art, you may have to attach the complete appraisal. See the **Note** in Part I below.

Part I Information on Donated Property—To be completed by the taxpayer and/or appraiser.

4 Check type of property:

- Art* (contribution of \$20,000 or more) Real Estate Gems/Jewelry Stamp Collections
 Art* (contribution of less than \$20,000) Coin Collections Books Other

*Art includes paintings, sculptures, watercolors, prints, drawings, ceramics, antique furniture, decorative arts, textiles, carpets, silver, rare manuscripts, historical memorabilia, and other similar objects.

Note: If your total art contribution deduction was \$20,000 or more, you must attach a complete copy of the signed appraisal. See instructions.

5	(a) Description of donated property (if you need more space, attach a separate statement)	(b) If tangible property was donated, give a brief summary of the overall physical condition at the time of the gift	(c) Appraised fair market value
A	See Attached Statement		
B			
C			
D			

6	(d) Date acquired by donor (mo., yr.)	(e) How acquired by donor	(f) Donor's cost or adjusted basis	(g) For bargain sales, enter amount received	See instructions	
					(h) Amount claimed as a deduction	(i) Average trading price of securities
A	Various	Purchase				
B						
C						
D						

Part II Taxpayer (Donor) Statement— List each item included in Part I above that the appraisal identifies as having a value of \$500 or less. See instructions.

I declare that the following item(s) included in Part I above has to the best of my knowledge and belief an appraised value of not more than \$500 (per item). Enter identifying letter from Part I and describe the specific item. See instructions▶

Signature of taxpayer (donor)▶

Date▶

Part III Declaration of Appraiser

I declare that I am not the donor, the donee, a party to the transaction in which the donor acquired the property, employed by or related to any of the foregoing persons, or married to any person who is related to any of the foregoing persons. And, if regularly used by the donor, donee, or party to the transaction, I performed the majority of my appraisals during my tax year for other persons.

Also, I declare that I hold myself out to the public as an appraiser or perform appraisals on a regular basis; and that because my qualifications as described in the appraisal, I am qualified to make appraisals of the type of property being valued. I certify that the appraisal fees were not based on a percentage of the appraised property value. Furthermore, I understand that a false or fraudulent overstatement of the property value as described in the qualified appraisal or this appraisal summary may subject me to the penalty under section 6701(a) (aiding and abetting the understatement of tax liability). I affirm that I have not been barred from presenting evidence or testimony by the Director of practice.

Sign

Here

Signature▶

Title▶

Date of appraisal▶

Business address (including room or suite no.)

Identifying number

City or town, state, and ZIP code

Part IV Donee Acknowledgment— To be completed by the charitable organization.

This charitable organization acknowledges that it is a qualified organization under section 170(c) and that it received the donated property as described in Section B, Part I, above on▶ (Date)

Furthermore, this organization affirms that in the event it sells, exchanges, or otherwise disposes of the property described Section B, Part I (or any portion thereof) within 2 years after the date of receipt, it will file Form 8282, Donee Information Return, with the IRS and give the donor a copy of that form. This acknowledgment does not represent agreement with the claimed fair market value

Does the organization intend to use the property for an unrelated use? Yes No

Name of charitable organization (donee) Department of Children and Family Services	Employer identification number X 95-0000-927
Address (number, street, and room or suite no.) 425 Shatto Place, 6th Floor	City or town, state, and ZIP code Los Angeles, CA 90020
Authorized signature X <i>Rethel Choma</i>	Title X DIRECTOR OF TRUST X FUNDS AND FUNDRAISING X FINANCE
	Date X 2/27/01



DEPARTMENT OF CHILDREN & FAMILY SERVICES DONATION RECEIPT

Attachment III

Taken By: _____

Date: _____

PART I (DONOR INFORMATION) Completed by DCFS staff.

Name of Organization or Individual (Please Print) SELF- REALIZATION

FELLOWSHIP - LAKE SHRINE

Contact Person: MARY DELAHANTE Telephone no.: (310) 454-4114

Address: 17190 SUNSET BLVD

City: PACIFIC PALISADES State: CA Zip Code: 90272

PART II (TYPE OF DONATION) DCFS staff complete one of the boxes below:

A. Financial (Check one)

1. Restricted 2. Unrestricted

Check Amount \$ _____

Cash Amount \$ _____

Total Amount \$ _____

Deposit Account/Sub-Account Title: _____

* Take Cash/Check immediately to Finance/Cash Mgmt. Unit for Deposit.

B. In-Kind or Service (Check one)

1. Restricted 2. Unrestricted

Estimated Value \$ 44,305
(Stated by Donor)

Description: GIFTS (550)
INCLUDING BICYCLES, TOYS,
SPECIAL CLOTHING, GIFT
CERTIFICATES

If restricted, please list/describe restrictions. FOR DCFS FOSTER CHILDREN OF W.L.A. OFFICE SUBMITTED BY SCW KANE PHELPS

Acknowledgement letter is is not _____ requested from receiving party.

PART III (IN-KIND DONATION TRANSFER) Completed by DCFS staff.

Transferred to (Name) _____ Telephone no.: _____

Bureau/Region _____

Directions for Pickup _____

PART IV (IN-KIND DONATION TRANSFER) Completed by DCFS staff receiving transfer.

Regional Contact Person _____ Telephone no.: _____

Bureau/Region _____

Items Received (Number & Description): _____

Received By: KANE PHELPS Telephone no.: 310 312-7128
(Print name)

Kane Phelps
(Signature)

(Date Received)

DEPARTMENT OF CHILDREN & FAMILY SERVICES DONATION RECEIPT

Taken By: Marlene
Date: 12/00

PART I (DONOR INFORMATION) Completed by DCFS staff.

Name of Organization or Individual (Please Print) UPS
Contact Person: Mr. Paul Teller Telephone no.: _____
Address: 3121 E. Jurupa
City: Ontario State: Ca Zip Code: 91761

PART II (TYPE OF DONATION) DCFS staff complete one of the boxes below:

A. Financial (Check one)

1. Restricted 2. Unrestricted

Check Amount \$ _____
 Cash Amount \$ _____
 Total Amount \$ _____
 Deposit Account/Sub-Account Title: _____

* Take Cash/Check immediately to Finance/Cash Mgmt. Unit for Deposit.

B. In-Kind or Service (Check one)

1. Restricted 2. Unrestricted

Estimated Value \$ 33,750.00
 (Stated by Donor)

Description: 1350 Presents
25.00 each

If restricted, please list/describe restrictions.

Acknowledgement letter is _____ is not _____ requested from receiving party.

PART III (IN-KIND DONATION TRANSFER) Completed by DCFS staff.

Transferred to (Name) _____ Telephone no.: _____
 Bureau/Region _____
 Directions for Pickup _____

PART IV (IN-KIND DONATION TRANSFER) Completed by DCFS staff receiving transfer.

Regional Contact Person _____ Telephone no.: _____
 Bureau/Region _____
 Items Received (Number & Description): _____

Received By: Pam Risinger Telephone no.: 858-5929
 (Print name)
Pamela Risinger Telephone no.: 12/00
 (Signature) (Date Received)

Distribution: Original to DCFS Finance Office
 Copy to DCFS Receiving Bureau/Region
 Copy to Donor (to be sent with acknowledgement letter)

DEPARTMENT OF CHILDREN & FAMILY SERVICES DONATION RECEIPT

Taken By: Marlene
Date: 12/00

PART I (DONOR INFORMATION) Completed by DCFS staff.

Name of Organization or Individual (Please Print) United Parcel Service
Contact Person: Mr. Paul Tolley Telephone no.: _____
Address: 3121 E. Jurupa
City: Ontario State: Ca Zip Code: 91761

PART II (TYPE OF DONATION) DCFS staff complete one of the boxes below.

A. Financial (Check one)

1. Restricted 2. Unrestricted

Check Amount \$ _____
 Cash Amount \$ _____
 Total Amount \$ _____
 Deposit Account/Sub-Account Title: _____

* Take Cash/Check immediately to Finance/Cash Mgmt. Unit for Deposit.

B. In-Kind or Service (Check one)

1. Restricted 2. Unrestricted

Estimated Value \$ 30,000.00
(Stated by Donor)

Description: Christmas Party
500 children and
150 adults.

If restricted, please list/describe restrictions.

Acknowledgement letter is _____ is not _____ requested from receiving party.

PART III (IN-KIND DONATION TRANSFER) Completed by DCFS staff.

Transferred to (Name) _____ Telephone no.: _____
Bureau/Region _____
Directions for Pickup _____

PART IV (IN-KIND DONATION TRANSFER) Completed by DCFS staff receiving transfer.

Regional Contact Person _____ Telephone no.: _____
Bureau/Region _____
Items Received (Number & Description): _____

Received By: Pam Risinger Telephone no.: 858-5929
(Print name)
Pamela Risinger 12/00
(Signature) (Date Received)

Distribution: Original to DCFS Finance Office
Copy to DCFS Receiving Bureau/Region
Copy to Donor (to be sent with acknowledgement letter)

DEPARTMENT OF CHILDREN & FAMILY SERVICES DONATION RECEIPT

Taken By: _____
Date: _____

PART I (DONOR INFORMATION) Completed by DCFS staff.

Name of Organization or Individual (Please Print) _____
Contact Person: Capt Pete Armico LACOS Telephone no.: 502-946-7829
Address: _____
City: _____ State: DC Zip Code: 20004

PART II (TYPE OF DONATION) DCFS staff complete one of the boxes below:

A. Financial (Check one)

1. Restricted 2. Unrestricted

Check Amount \$ _____
Cash Amount \$ _____
Total Amount \$ _____
Deposit Account/Sub-Account Title: _____

* Take Cash/Check immediately to Finance/Cash Mgmt. Unit for Deposit.

B. In-Kind or Service (Check one)

1. Restricted 2. Unrestricted

Estimated Value \$ 30,000
(Stated by Donor)

Description: 999 Party for Kids

If restricted, please list/describe restrictions. _____

Acknowledgement letter is is not _____ requested from receiving party.

PART III (IN-KIND DONATION TRANSFER) Completed by DCFS staff.

Transferred to (Name) _____ Telephone no.: _____
Bureau/Region _____
Directions for Pickup _____

PART IV (IN-KIND DONATION TRANSFER) Completed by DCFS staff receiving transfer.

Regional Contact Person _____ Telephone no.: _____
Bureau/Region _____
Items Received (Number & Description): party for medical placement unit every child & deaf unit extra toys given to ARA's for no shows
Received By: PAM KISINGER Telephone no.: 626 2585929
(Print name)
Pamela Kisinger (Signature)
12/01/00 (Date Received)

Distribution: Original to DCFS Finance Office
Copy to DCFS Receiving Bureau/Region
Copy to Donor (to be sent with acknowledgement letter)

PART I (DONOR INFORMATION) Completed by DCFS staff.

Name of Organization or Individual (Please Print) Fire Station 73

Contact Person: Steve Brock Telephone no.: 0549661

Address: 24875 San Fernando Rd

City: San Clarita State: CA Zip Code: 91321

PART II (TYPE OF DONATION) DCFS staff complete one of the boxes below.

A. Financial (Check one)

1. Restricted 2. Unrestricted

Check Amount \$ _____

Cash Amount \$ _____

Total Amount \$ _____

Deposit Account/Sub-Account Title: _____

** Take Cash/Check immediately to Finance/Cash Mgmt. Unit for Deposit.*

B. In-Kind or Service (Check one)

1. Restricted 2. Unrestricted

Estimated Value \$ 20,000

(Stated by Donor)

Description: 1000 ASST. PCs

If restricted, please list/describe restrictions. Region VIII

Acknowledgement letter is is not _____ requested from receiving party.

PART III (IN-KIND DONATION TRANSFER) Completed by DCFS staff.

Transferred to (Name) _____ Telephone no.: _____
Bureau/Region _____
Directions for Pickup _____

PART IV (IN-KIND DONATION TRANSFER) Completed by DCFS staff receiving transfer.

Regional Contact Person SYDNEY TUCKER Telephone no.: 661/288-2707
Bureau/Region REGION VIII
Items Received (Number & Description): _____

Received By SYDNEY TUCKER Telephone no.: 661/288-2707
(Print name)
Sydney Tucker (Signature) _____ (Date Received)

Distribution: Original to DCFS Finance Office
Copy to DCFS Receiving Bureau/Region
Copy to Donor (to be sent with acknowledgement letter)



ANITA M. BOCK
Director

County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

425 Shatto Place – Los Angeles, California 90020
(213) 351-5602

January 22, 2001

Firefighters
Fire Station 73
248 75 San Fernando Road
Santa Clarita, 91321

Dear Firefighters:

On behalf of the children, families and social workers of the Los Angeles County Department of Children and Family Services (DCFS), I want to thank you for your continued support of the children of DCFS. The number of toys you donated to us was incredible. Almost every child we serve received a Christmas gift because of your generosity.

So many of the children under our supervision have little joy in their lives. The toys that many others take for granted are truly important in these young people's lives. Through your kindness, you have made them feel like other children, children who have not gone through the trauma of placement or chaos of disrupted families.

I wish all of you a happy, healthy and prosperous new year. I am looking forward to working with you in the future. You can reach me at (661) 288-2707.

Sincerely,

A handwritten signature in cursive script that reads "Sydney Tucker".

Sydney Tucker, SCSW
Resource Coordinator, Region VIII

Taken By: Sydney Tucker
Date: 12/12/00

PART I (DONOR INFORMATION) Completed by DCFS staff.

Name of Organization or Individual (Please Print) Lockheed AERONAUTICS Co.

Contact Person: Palmdale Rick BAKER Telephone no.: _____

Address: 1011 LOCKHEED WAY
City: Palmdale State: CA Zip Code: 92599

PART II (TYPE OF DONATION) DCFS staff complete one of the boxes below:

A. Financial (Check one)

1. Restricted 2. Unrestricted

Check Amount \$ _____
 Cash Amount \$ _____
 Total Amount \$ _____
 Deposit Account/Sub-Account Title: _____

** Take Cash/Check immediately to Finance/
 Cash Mgmt. Unit for Deposit.*

B. In-Kind or Service (Check one)

1. Restricted 2. Unrestricted

Estimated Value \$ 17000
 (Stated by Donor)

Description: 850 unit gifts

If restricted, please list/describe restrictions.

Region VIII

Acknowledgement letter is is not _____ requested from receiving party.

PART III (IN-KIND DONATION TRANSFER) Completed by DCFS staff.

Transferred to (Name) _____ Telephone no.: _____
 Bureau/Region _____
 Directions for Pickup _____

PART IV (IN-KIND DONATION TRANSFER) Completed by DCFS staff receiving transfer.

Regional Contact Person SYDNEY TUCKER Telephone no.: 661/288-2707
 Bureau/Region REGION VIII
 Items Received (Number & Description) _____

Received By: SYDNEY TUCKER Telephone no.: 661/288-2707
 (Print name) _____
Sydney Tucker (Signature) _____ (Date Received) _____

Distribution: Original to DCFS Finance Office
 Copy to DCFS Receiving Bureau/Region
 Copy to Donor (to be sent with acknowledgement letter)



ANITA M. BOCK
Director

County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

425 Shatto Place -- Los Angeles, California 90020
(213) 351-5602

January 22, 2001

Rick Baker, Vice President and General Site Manager
Lockheed Aeronautics Company
1011 Lockheed Way
Palmdale, CA 93599

Dear Mr. Baker:

On behalf of the children, families and social workers of the Los Angeles County Department of Children and Family Services (DCFS), I want to thank you for your continued support of the children of DCFS. The number of toys you and your staff donated to us was incredible. Almost every child we serve received a Christmas gift because of your generosity.

So many of the children under our supervision have little joy in their lives. The toys that many others take for granted are truly important in these young people's lives. Through your kindness, you have made them feel like other children, children who have not gone through the trauma of placement or chaos of disrupted families.

I wish you, and your staff a happy, healthy and prosperous new year. I am looking forward to working with you in the future. You can reach me at (661) 288-2707.

Sincerely,

Sydney Tucker, SCSW
Resource Coordinator, Region VIII

Taken By: Sydney Tucker

Date: 12/2/00

PART I (DONOR INFORMATION) Completed by DCFS staff.

Name of Organization or Individual (Please Print) Mount Gleason Fire Camp

Contact Person: John Solis Telephone no.: _____

Address: 22271 Bogie St

City: Teahachapi State: CA Zip Code: 93861

PART II (TYPE OF DONATION) DCFS staff complete one of the boxes below:

A. Financial (Check one)

1. Restricted 2. Unrestricted

Check Amount \$ _____

Cash Amount \$ _____

Total Amount \$ _____

Deposit Account/Sub-Account Title: _____

* Take Cash/Check immediately to Finance/
Cash Mgmt. Unit for Deposit.

B. In-Kind or Service (Check one)

1. Restricted 2. Unrestricted

Estimated Value \$ 10,000
(Stated by Donor)

Description: 500 unsorted
wall plaques

If restricted, please list/describe restrictions.

Region VIII

Acknowledgement letter is is not _____ requested from receiving party.

PART III (IN-KIND DONATION TRANSFER) Completed by DCFS staff.

Transferred to (Name) _____ Telephone no.: _____

Bureau/Region _____

Directions for Pickup _____

PART IV (IN-KIND DONATION TRANSFER) Completed by DCFS staff receiving transfer.

Regional Contact Person SYDNEY TUCKER Telephone no.: 661/288-2707

Bureau/Region REGION VIII

Items Received (Number & Description): _____

Received By SYDNEY TUCKER
Sydney Tucker (Print name)
(Signature)

Telephone no.: 661/288-2707

(Date Received)

Distribution: Original to DCFS Finance Office
Copy to DCFS Receiving Bureau/Region
Copy to Donor (to be sent with acknowledgement letter)



ANITA M. BOCK
Director

County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

425 Shatto Place, Los Angeles, California 90020
(213) 351-5602

February 1, 2001

Officer John Solis
22271 Bogie Street
Tehachapi, CA 93561

Dear Officer Solis:

On behalf of the children, families and social workers of the Los Angeles Department of Children and Family Services, I want to thank you and your volunteers for the beautiful mounted posters that you designed. It is so special for the children to get a gift that was handcrafted specifically for them.

The designs this year were very pretty and versatile. The children were very pleased. I know that the men put much effort and care into their work and I appreciate it very much. Considering the number and severity of the fires during this season, the production was incredible.

I wish all of you a safe and healthy 2001. Enclosed is a tax-exempt donation form. Please keep it for your files. I can be reached at (661) 288-2707.

Sincerely,

A handwritten signature in cursive script that reads "Sydney Tucker".

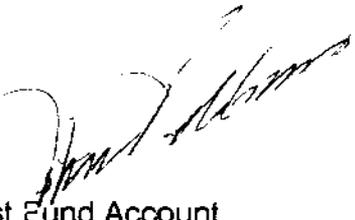
Sydney Tucker, SCSW
Resource Coordinator, Region VIII

MACLAREN CHILDREN'S CENTER

April 24, 2001

To: Ed Jewick
Finance Officer

From: John Robbins, Chairman
MacLaren Children's Center Trust Fund Account



DONATIONS RECEIVED OVER \$10,000

Enclosed you will find the Donations Received Over \$10,000 report from MacLaren Children's Center for the month of March 2001.

If you have any questions please feel free to call me at (626) 455-4501.

JR:la

Enclosure

c: Velda Moore

DEPARTMENT OF CHILDREN & FAMILY SERVICES

FOR THE MONTH OF: MARCH, 2001

MACLAREN CHILDREN'S CENTER

DONATION REPORT
Over \$10,000

NAME AND ADDRESS OF DONOR	DESCRIPTION OF DONATION	ESTIMATED VALUE
Todd Pipe & Supply 4828 W. 145 th St. Hawthorne, CA 90251	Eighteen computers with monitors	\$15,000.00
Total :		<u>\$15,000.00</u>