

Nonprofit Travel Payments, Advances and Reimbursements

Donor Disclosure List

A Public Document

1. Nonprofit Organization Information

501(c)(3) 501(c)(4)

Date Stamp

California
Form **807**

For Official Use Only

Name of Organization

California Border Issues Project

Street Address

455 Capitol Mall, Suite 600, Sacramento, CA 95814

Designated Contact Person (Name and title)

Ashlee Titus, agent for filer

Area Code/Phone Number

(916) 442-7757

Email

atitus@bmhlaw.com

Amendment (See Part 3)

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

2. Donor Information (For additional donors, include an attachment with the information)

Name of Donor

California Cable and Telecommunications Association

Street Address

925 L Street, Suite 850, Sacramento, CA 95814

Elected Official's Name and Position, Including the Agency Name

See attachment

Travel Destination and Purpose

Legislative Delegation to Mexico City, Mexico

Name of Donor

California Correctional Peace Officers Association

Street Address

1121 L Street, Suite 200, Sacramento, CA 95814

Elected Official's Name and Position, Including the Agency Name

See attachment

Travel Destination and Purpose

Legislative Delegation to Mexico City, Mexico

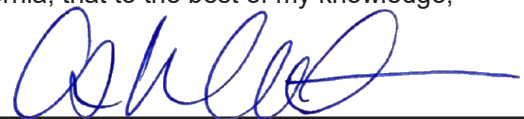
3. Amendment Description and/or Comments

4. Verification

I certify, under penalty of perjury under the laws of the State of California, that to the best of my knowledge, the information contained herein is true and complete.

Date Signed: 04/23/2024

Signature: _____



Print

Clear

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California Form 807

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Amendment (See Part 3)

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

2. Donor Information (For additional donors, include an attachment with the information)

Name of Donor

California Labor and Business Alliance

Street Address

428 J Street, Suite 412, Sacramento, CA 95814

Elected Official's Name and Position, Including the Agency Name

See attachment

Travel Destination and Purpose

Legislative Delegation to Mexico City, Mexico

Name of Donor

California Operators Association

Street Address

1201 K Street, Suite 750, Sacramento, CA 95814

Elected Official's Name and Position, Including the Agency Name

See attachment

Travel Destination and Purpose

Legislative Delegation to Mexico City, Mexico

3. Amendment Description and/or Comments

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(month, day, year)

2. Donor Information (For additional donors, include an attachment with the information)

Name of Donor

California Real Estate Political Action Committee

Street Address

515 S. Figueroa Street, Suite 1110, Los Angeles, CA 90071

Elected Official's Name and Position, Including the Agency Name

See attachment

Travel Destination and Purpose

Legislative Delegation to Mexico City, Mexico

Name of Donor

California State Council of Laborers

Street Address

925 L Street, Suite 1450, Sacramento, CA 95814

Elected Official's Name and Position, Including the Agency Name

See attachment

Travel Destination and Purpose

Legislative Delegation to Mexico City, Mexico

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Date of Original Filing: _____
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2. Donor Information (For additional donors, include an attachment with the information)

Name of Donor

Chevron Products Company

Street Address

6001 Bollinger Canyon Road, San Ramon, CA 94583

Elected Official's Name and Position, Including the Agency Name

See attachment

Travel Destination and Purpose

Legislative Delegation to Mexico City, Mexico

Name of Donor

Dart Container

Street Address

500 Hogsback Road, Mason, MI 48854

Elected Official's Name and Position, Including the Agency Name

See attachment

Travel Destination and Purpose

Legislative Delegation to Mexico City, Mexico

3. Amendment Description and/or Comments

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Signature: _____

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1. Nonprofit Organization Information <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)(4)		Date Stamp	California Form 807 For Official Use Only
Name of Organization California Border Issues Project			
Street Address 455 Capitol Mall, Suite 600, Sacramento, CA 95814			
Designated Contact Person (Name and title) Ashlee Titus, agent for filer		<input type="checkbox"/> Amendment (See Part 3)	
Area Code/Phone Number (916) 442-7757	Email atitus@bmhlaw.com	Date of Original Filing: _____ (month, day, year)	

2. Donor Information (For additional donors, include an attachment with the information)

Name of Donor DaVita
Street Address 500 North Capitol Street NW, Suite 300, Washington, DC 20001
Elected Official's Name and Position, Including the Agency Name See attachment
Travel Destination and Purpose Legislative Delegation to Mexico City, Mexico
Name of Donor Golden State Clean Energy
Street Address 3857 Birch Street, Suite 441, Newport Beach, CA 92660
Elected Official's Name and Position, Including the Agency Name See attachment
Travel Destination and Purpose Legislative Delegation to Mexico City, Mexico

3. Amendment Description and/or Comments

4. Verification

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Date Signed: _____ Signature: _____

Print **Clear**

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2. Donor Information (For additional donors, include an attachment with the information)

Name of Donor

PhRMA

Street Address

950 F Street NW, Suite 300, Washington, DC 20004

Elected Official's Name and Position, Including the Agency Name

See attachment

Travel Destination and Purpose

Legislative Delegation to Mexico City, Mexico

Name of Donor

Snap, Inc.

Street Address

2900 31st Street, Santa Monica, CA 90405

Elected Official's Name and Position, Including the Agency Name

See attachment

Travel Destination and Purpose

Legislative Delegation to Mexico City, Mexico

3. Amendment Description and/or Comments

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Area Code/Phone Number (916) 442-7757	Email atitus@bmhlaw.com	Date of Original Filing: _____ (month, day, year)	

2. Donor Information (For additional donors, include an attachment with the information)

Name of Donor Valero Services, Inc.
Street Address 1 Valero Way, San Antonio, TX 78249
Elected Official's Name and Position, Including the Agency Name See attachment
Travel Destination and Purpose Legislative Delegation to Mexico City, Mexico
Name of Donor
Street Address
Elected Official's Name and Position, Including the Agency Name
Travel Destination and Purpose

3. Amendment Description and/or Comments

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Date Signed: _____

Signature: _____

Print

Clear

Attachment

Blanca Rubio, State Assemblymember, California State Assembly

David Alvarez, State Assemblymember, California State Assembly

Blanca Pacheco, State Assemblymember, California State Assembly

Cottie Petrie-Norris, State Assemblymember, California State Assembly

Esmeralda Soria, State Assemblymember, California State Assembly

Marie Alvarado-Gil, State Senator, California State Senate

Anna Caballero, State Senator, California State Senate