Gift to Agency Report	A Public Document		GIFT TO AGENCY REPORT
1. Agency Name	in Xi-lint	Date Stamp	California 801
Division, Department, or Region (if applicable	1001 1118714		For Official Use Only
Pupil Services		11-18-11	
Street Address 222 S Brandon M	2014 Floor CA a0017	(m)	
Area Code/Phone Number (E-mail	1 1 0 1 1 1	Amendment (explain in	comment section)
Agency Contact (name and title)	duardo Claustinet	Date of Original Filing:	11-14-11
Nebra Mardo			(month, day, year)
2. Donor Name and Address	,	()	1 1 1 0
□ Individual Last Name First Name Other Honorum Construction Croup			
Hongrun Tower 200-28 Long Lao Rd. Shanghai, 200233, China			
Promote LAUSD Office of Foreign Student Admissions, Learn about Chinese education			
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) solicited or received by the donor for this gift:			
	Amount	Name	\$
3. Payment Information			
Date and Amount of Payment (other than travel) \$ (Round to whole dollars)			
Chia			
Travel Payment Information (Round to whole dollars) Location of Travel			
Date(s) of Trafvel Transfortation Expenses Solution Solution			
Provide a specific description of the nature and use of the payment for official agency business:			
Identify the officials for whom the p	ayment was used:		*1 (
Last Name Fi	Direct	or Pu	pil Services
Last Name	rst Name	Title	Department/Division
Last Name Fi	rst Name	Title TO	Department/Division
4. Verification			
I have determined that it is in the interests of the agency to accept this gift and use it for the official agency business described above.			
Sever tours - Rene Conzalez Asst Superintendent 11/15/11			
Signature of Agency Head or Designee Print Name Title (month, day, year)			
Comment: (Use this space or an attachment for any additional information.)			