### 1. Agency Name
California Energy Commission

**Division, Department, or Region (if applicable)**

Small Offices / Commissioners Office

**Street Address**
1516 9th Street

**Area Code/Phone Number**
(916) 651-6176

**Email**
kevin.barker@energy.ca.gov

**Agency Contact (name and title)**
Kevin Barker, Chief of Staff to Chair Robert B. Weisenmiller

### 2. Donor Name and Address

- **The Climate Group**
  - **Riverside Bldg., County Hall, Belvedere Rd.**
  - **London, SE1 7PB, United Kingdom**

**Aims to address climate change through renewable energy & greenhouse gas emissions reduction projects & campaigns**

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:

<table>
<thead>
<tr>
<th>Name</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 3. Payment Information (Complete Sections 3.1 (a or b), 3.2, 3.3)

#### 3.1 (a) Travel Payment

- **Location of Travel**
  - Essen, Germany
- **Transportation Provider**
  - British Airways and Virgin Atlantic
- **Motel One Essen/Airport Lounge**

**Dates (month, day, year)**
April 23-27, 2018

**Name and Address of Lodging Facility**

<table>
<thead>
<tr>
<th>Lodging Expenses</th>
<th>Meal Expenses</th>
<th>Transportation Expenses</th>
<th>Other Expenses</th>
<th>Total Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>$371.47</td>
<td>$338.87</td>
<td>$1,127.35</td>
<td>$9.39</td>
<td>$1,847.08</td>
</tr>
</tbody>
</table>

**3.1 (b) Payment(s) not related to travel:**

<table>
<thead>
<tr>
<th>Dates (month, day, year)</th>
<th>$</th>
</tr>
</thead>
</table>

### 3.2. Payment Description. Provide a specific description of the payment and its agency purpose and use.

Kevin Barker has been asked to speak at the Energy Transition Plan Innovation Lab Workshop to provide inputs on California's key energy efficiency challenges and policies.

### 3.3. Identify the officials who used the payment in Section 3.1 (See instructions)

<table>
<thead>
<tr>
<th>Barker</th>
<th>Last Name</th>
<th>First Name</th>
<th>Chief of Staff</th>
<th>Last Name</th>
<th>First Name</th>
<th>Position/Title</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Kevin</td>
<td></td>
<td></td>
<td>Kevin</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Chief of Staff</td>
<td></td>
<td></td>
<td>Chief of Staff</td>
</tr>
</tbody>
</table>

### 4. Verification

I authorized the acceptance of the reported payment(s) as in compliance with FPPC regulations.

**Signature**

Courtney Smith

**Print Name**
Chief Deputy Director

**Title**

(Use this space or an attachment for any additional information)

FPPC Form 801 (Jan/14)
advice@fppc.ca.gov