



STATE OF VERMONT
LEGISLATIVE JOINT FISCAL OFFICE

MEMORANDUM

TO: Joint Fiscal Committee Members

FROM: Maria Belliveau, Associate Fiscal Officer

A handwritten signature in black ink, appearing to be "MB", written over the printed name of Maria Belliveau.

DATE: September 22, 2015

SUBJECT: Donation of \$100,000 from Amber Jean Productions, Inc.

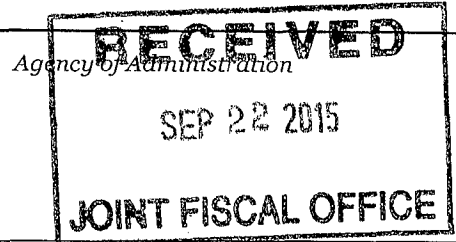
The Joint Fiscal Committee has received a request from the Department of Finance and Management to approve the acceptance of a \$100,000 donation from Amber Jean Productions, Inc. for the "Food Fight Fund." This organization is based in Los Angeles, CA.

Section 4 of Act No. 120 of 2014 established the Genetically Engineered Food Labeling Special Fund to pay the costs or liabilities incurred by the Attorney General or the State in implementation and administration, including rulemaking, of the requirements, of the food labeling law. Deposits into the fund include private gifts, bequests, grants, or donations as well as \$1.5 million from settlement monies collected by the Attorney General's Office. To date the fund has received \$1.5 million from the settlement funds and \$651,000 from private donations, including this \$100,000, for a total of \$2,151,000.

Please review the enclosed materials and notify the Joint Fiscal Office (Maria Belliveau at (802) 828-5971; mbelliveau@leg.state.vt.us) if you have questions or would like this item held for legislative review. Unless you respond to the contrary by October 7, 2015 it will be assumed that you agree to consider as final the Governor's acceptance of this donation.

State of Vermont
 Department of Finance & Management
 109 State Street, Pavilion Building
 Montpelier, VT 05620-0401

[phone] 802-828-2376
 [fax] 802-828-2428



STATE OF VERMONT
FINANCE & MANAGEMENT GRANT REVIEW FORM

Grant Summary:		Donation to help fund the "Food Fight Fund" to pay costs incurred by the Attorney General as a result of requirements for labeling of food produced from genetic engineering.			
Date:		9/11/2015			
Department:		AoA Finance and Management			
Legal Title of Grant:		Food Fight Fund Donation - Amber Jean Productions, Inc.			
Federal Catalog #:		N/A			
Grant/Donor Name and Address:		Amber Jean Productions, Inc. c/o Chapman, Bird & Tessler, Inc. 1990 South Bundy Drive #200, Los Angeles, CA 90025			
Grant Period:		From: 8/21/2015		To:	
Grant/Donation		\$100,000			
	SFY 1	SFY 2	SFY 3	Total	Comments
Grant Amount:	\$100,000	\$	\$	\$100,000	
Position Information:		# Positions	Explanation/Comments		
		0			
Additional Comments:					
Has Vantage budget detail been reviewed and reconciled?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	HC (Analyst Initial)	
Department of Finance & Management		BZF		(Initial)	
Secretary of Administration		Re 09/19/15		(Initial)	
Sent To Joint Fiscal Office		9/16/15		Date	



STATE OF VERMONT REQUEST FOR GRANT (*) ACCEPTANCE (Form AA-1)

BASIC GRANT INFORMATION				
1. Agency:	Administration			
2. Department:	Finance and Management			
3. Program:	Food Fight Fund			
4. Legal Title of Grant:	Food Fight Donation - Amber Jean Productions, Inc.			
5. Federal Catalog #:	N/A			
6. Grant/Donor Name and Address:				
Amber Jean Productions, Inc. c/o Chapman, Bird & Tessler, Inc. 1990 South Bundy Drive #200, Los Angeles, CA 90025				
7. Grant Period:	From:	8/21/2015	To:	
8. Purpose of Grant:				
To pay costs or liabilities incurred by the Attorney General or the State for the implementation and administration, including rulemaking, of the requirements under 9 V.S.A. chapter 82A for the labeling of food produced from genetic engineering.				
9. Impact on existing program if grant is not Accepted:				
Insufficient funds to cover the costs detailed above.				
10. BUDGET INFORMATION				
	SFY 1	SFY 2	SFY 3	Comments
Expenditures:	FY 15	FY	FY	
Personal Services	\$100,000	\$	\$	Legal Contract
Operating Expenses	\$	\$	\$	
Grants	\$	\$	\$	
Total	\$100,000	\$	\$	
Revenues:				
State Funds:				
Cash	\$	\$	\$	
In-Kind	\$	\$	\$	
Federal Funds:				
(Direct Costs)	\$	\$	\$	
(Statewide Indirect)	\$	\$	\$	
(Departmental Indirect)	\$	\$	\$	
Other Funds:				
Grant (source)	\$100,000	\$	\$	
Total	\$100,000	\$	\$	
Appropriation No:	1110003000		Amount:	\$
				\$
				\$
				\$
				\$
				\$
				\$

AUG 21 2015

STATE OF VERMONT REQUEST FOR GRANT (*) ACCEPTANCE (Form AA-1)

	Total \$100,000
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Has current fiscal year budget detail been entered into Vantage? Yes No

PERSONAL SERVICE INFORMATION

11. Will monies from this grant be used to fund one or more Personal Service Contracts? Yes No
 If "Yes", appointing authority must initial here to indicate intent to follow current competitive bidding process/policy.

Appointing Authority Name: _____ Agreed by: _____ (initial)

12. Limited Service Position Information:	# Positions	Title
Total Positions		

12a. Equipment and space for these positions: Is presently available. Can be obtained with available funds.

13. AUTHORIZATION AGENCY/DEPARTMENT

I/we certify that no funds beyond basic application preparation and filing costs have been expended or committed in anticipation of Joint Fiscal Committee approval of this grant, unless previous notification was made on Form AA-1PN (if applicable):	Signature: <i>[Signature]</i>	Date: <i>8/28/15</i>
	Title: <i>Deputy Commissioner</i>	
	Signature: _____	Date: _____
	Title: _____	

14. SECRETARY OF ADMINISTRATION

<input checked="" type="checkbox"/>	Approved:	(Secretary or designee signature) <i>[Signature]</i> <i>Deputy</i>	Date: <i>9/14/15</i>
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15. ACTION BY GOVERNOR

<input checked="" type="checkbox"/>	Check One Box: Accepted	(Governor's signature) <i>[Signature]</i>	Date: <i>9/16/15</i>
<input type="checkbox"/>	Rejected		

16. DOCUMENTATION REQUIRED

Required GRANT Documentation	
<input type="checkbox"/> Request Memo <input type="checkbox"/> Dept. project approval (if applicable) <input type="checkbox"/> Notice of Award <input type="checkbox"/> Grant Agreement <input type="checkbox"/> Grant Budget	<input checked="" type="checkbox"/> Notice of Donation (if any) <input type="checkbox"/> Grant (Project) Timeline (if applicable) <input type="checkbox"/> Request for Extension (if applicable) <input type="checkbox"/> Form AA-1PN attached (if applicable)

End Form AA-1

(*) The term "grant" refers to any grant, gift, loan, or any sum of money or thing of value to be accepted by any agency, department, commission, board, or other part of state government (see 32 V.S.A. §5).

AMBER JEAN PRODUCTIONS, INC.

Date 08-17-15 Check No. 4614

Invoice		Description	Account	Distribution
Number	081315		315/142	100,000.00
Vendor	VERMONT			
Date	08-13-15			
Payment	100,000.00			
Doc ID	0001151117			

DO NOT CASH THIS CHECK UNLESS YOU CAN SEE THE BLUE WATERMARK. HOLD UP TO LIGHT TO SEE SAFE AND VERIFY FIRST. THIS DOCUMENT HAS A NANOCOPY SECURITY BACKGROUND.

AMBER JEAN PRODUCTIONS, INC.
 C/O CHAPMAN, BIRD & TESSLER, INC.
 1990 SOUTH BUNDY DRIVE #200
 LOS ANGELES, CA 90025
 (310) 571-4000

Date 08-17-15 Check No. 4614
 107 AGARCIA 90-3752/1211
 COMERICA BANK-CALIFORNIA
 2000 AVENUE OF THE STARS
 LOS ANGELES, CA 90067

ONE HUNDRED THOUSAND DOLLARS EXACTLY

***\$100,000.00

Pay to the order of THE VERMONT FOOD FIGHT FUND
 AGENCY OF ADMINISTRATION FINANCIAL SERVICES
 6 BALDWIN STREET
 MONTPELIER, VT 05609

[Handwritten Signature]

BRJN

⑈004614⑈ ⑆121137522⑆ 1892771435⑈

Chapman, Bird & Tessler
1990 S. Bundy Dr. Ste. 200
Los Angeles, CA 90025
310-571-4000

08/17/2015

DONATION ACKNOWLEDGEMENT

In order to comply with the Revenue Reconciliation Act of 1993, please acknowledge our contribution to your organization by signing and returning this form as soon as possible.

Contribution Made To:

The Vermont Food Fight Fund
Agency of Administration Financial Services
6 Baldwin Street
Montpelier, VT 05609

Courtesy Of:

Amber Jean Productions, Inc.

1. Amount of contribution: \$ 100,000.00

2. Date contribution received: _____

3. Form of contribution

Cash/Check

Other

Description _____

4. Were any goods or services provided by your organization in consideration of this contribution?

Yes

No

5. If yes, describe goods or services received and estimated value:

The information above is provided for the purpose of complying with IRS requirements and is accurate to the best of my knowledge.

NAME _____

SIGNATURE _____ TITLE _____

Johnson, Harriet

From: Gray, Laura
Sent: Friday, August 21, 2015 10:04 AM
To: Johnson, Harriet
Subject: RE: Food Fight

Yep will do

From: Johnson, Harriet
Sent: Friday, August 21, 2015 9:53 AM
To: Gray, Laura
Subject: FW: Food Fight

Are you filling out the form and returning it? If so, can I get a copy?
thanks

Harriet Johnson | Agency of Administration
109 State Street | Montpelier, VT 05609-0201
ph: 802.828.3322 | fax: 802.828.3320

From: McCuen, Raya
Sent: Friday, August 21, 2015 9:48 AM
To: Gray, Laura; Ferland, Brad; Johnson, Harriet
Subject: Food Fight

Hi Laura,

I received the attached check today, \$100,000.00 for Food Fight. I'm doing the deposit. Please do the paper work and return this letter to them.

Thanks,
Raya

