Behested Payment Report

1. Elected Officer or CPUC Member (Last name, First name)
   Reed, Chuck

   Agency Name
   City of San José

   Agency Street Address
   200 E Santa Clara Street, San José, California 95113

   Designated Contact Person (Name and title, if different)
   Sara Wright, Agenda Services Manager

   Area Code/Phone Number
   (408) 535-4800

   E-mail (Optional)
   mayor email@sanjoseca.gov

   Date of Original Filing: 01/17/12

2. Payor Information (For additional payors, include an attachment with the names and addresses.)
   Bobby Ram, Director, Global Community Relations, SunPower
   Name
   3939 North First Street
   Address
   San José
   City
   CA
   State
   95134
   Zip Code

3. Payee Information (For additional payees, include an attachment with the names and addresses.)
   Downtown for the Holidays Fundraising Campaign
   Name
   28 North First Street #1000
   Address
   San José
   City
   CA
   State
   95113
   Zip Code

4. Payment Information (Complete all information.)
   Date of Payment: 08/09/11
   Amount of Payment: (In-Kind FMV) $25,000
   (Round to whole dollars.)

   Payment Type:
   ☑ Monetary Donation or ☐ In-Kind Goods or Services

   Brief Description of In-Kind Payment: Check

   Purpose:
   ☐ Legislative ☑ Governmental ☐ Charitable

   Describe the legislative, governmental, charitable purpose, or event:
   A fundraising campaign to support Christmas in the Park, Winter Wonderland, and San José Downtown's other primary holiday events.

5. Amendment Description or Comments

6. 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.

Executed on 1/10/12

By Chuck Reed

SIGNATURE OF ELECTED OFFICER OR CPUC MEMBER