1. Elected Officer or CPUC Member (Last name, First name)
   Mayor Sam Liccardo

2. Payor Information (For additional payors, include an attachment with the names and addresses.)
   Rebecca Prozan & Mark Colan

3. Payee Information (For additional payees, include an attachment with the names and addresses.)
   Silicon Valley Leadership Group

4. Payment Information (Complete all information.)
   Date of Payment: 10/16/17
   Amount of Payment: (In-Kind FMV) $50,000
   Payment Type: [x] Monetary Donation or [ ] In-Kind Goods or Services (Provide description below.)

5. Amendment Description and/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 1/22/20
   By

FPPC Form 803 (January/2018)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)