# Behested Payment Report

## 1. Elected Officer or CPUC Member

**Mayor Sam Liccardo**

**Agency Name**: City of San Jose

**Agency Street Address**: 200 E. Santa Clara, San Jose, CA, 95113

**Designated Contact Person**: Henry Smith

### Date of Original Filing: 03/02/17

## 2. Payor Information

**Karla Lomax**

**Address**: 111 Almaden Blvd, San Jose, CA 95115

## 3. Payee Information

**Silicon Valley Community Foundation**

**Address**: 101 W. San Fernando Street #310, San Jose, CA 95113

## 4. Payment Information

**Date of Payment**: 03/02/17

**Amount of Payment**: (In-Kind FMV) $20,000

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

**Brief Description of In-Kind Payment**: San Jose Flood Victims Relief Fund

**Purpose**: (Check one and provide description below.)

- ☐ Legislative
- ☐ Governmental
- ☑ Charitable

**Describe the legislative, governmental, charitable purpose, or event**: San Jose Flood Victims Relief Fund

## 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**: 03/02/20

**Signature of Elected Officer or CPUC Member**: Sam Liccardo

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FPPC Form 803 (January/2018)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)