Behested Payment Report

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

   Agency Name
   City of San Jose

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

   Designated Contact Person (Name and title, if different)
   Henry Smith

   Area Code/Phone Number
   4085354831

   E-mail (Optional)
   henry.smith@sanjoseca.gov

2. Payor Information (For additional payors, include an attachment with the names and addresses.)
   Seth Bland
   Name
   356 Santana Row, #1005
   Address
   San Jose
   City
   CA
   State
   95128
   Zip Code

3. Payee Information (For additional payees, include an attachment with the names and addresses.)
   The Silicon Valley Organization
   Name
   101 W Santa Clara St
   Address
   San Jose
   City
   CA
   State
   95113
   Zip Code

4. Payment Information (Complete all information.)
   Date of Payment: 02/14/17
   Amount of Payment: (In-Kind FMV) $ 10,000
   (Round to whole dollars.)

   Payment Type: ☒ Monetary Donation or ☐ In-Kind Goods or Services
   (Provide description below.)

   Brief Description of In-Kind Payment: The Silicon Valley Organization

5. Amendment Description and/or Comments

   Purpose: (Check one and provide description below.) ☐ Legislative ☐ Governmental ☒ Charitable
   Describe the legislative, governmental, charitable purpose, or event: The Silicon Valley Organization

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
   DATE

   By
   SIGNATURE OF ELECTED OFFICER OR CPUC MEMBER

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