A Public Document

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

2. Payor Information (For additional payors, include an attachment with the names and addresses.)
   Jim Elliot
   Name
   3655 N. 1st Street
   San Jose
   CA
   95134

3. Payee Information (For additional payees, include an attachment with the names and addresses.)
   Downtown Streets Team
   Name
   1671 The Alameda
   San Jose
   CA
   95126

4. Payment Information (Complete all information.)
   Date of Payment: 01/16/18
   Payment Type: ☑ Monetary Donation
   Amount of Payment: $15,000
   (In-Kind FMV)
   Purpose: ☑ Charitable
   Describe the legislative, governmental, charitable purpose, or event:
   Downtown Streets Team for San Jose Gateways

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 12/2/20
By [signature]

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