ים	enesieu Payment Ne	Port	A i ubilo boca	1110114	Benested Payment Report
1.	Elected Officer or CPUC Bredefeld, Garry	Member (Last	name, First name)	RECE StampED	California 803
					For Official Use Only
	Agency Name City of Fresno			2021 NOV 15 A H: W	
				2021 NOV 16 A H: 4)
	Agency Street Address 2600 Fresno Street Designated Contact Person (Name and title, if different)			CITY OF FRESHO	
				CHY CLERK'S DEFICE	
			merent)	Amendment (See Part 5	5)
	Garry Bredefeld, Councilm			Date of Original Filing:	
	Area Code/Phone Number	E-mail (Optional)			(month, day, year)
	(559) 621-8000		eld@fresno.gov		
2.	Payor Information (For additional payors, include an attachment with the names and addresses.)				
	Cedar Avenue Recycling and Transfer Station				
	Name				
	P.O. Box 446		Fresno	CA	93709
	Address		City	State	Zip Code
3.	Payee Information (For additional payees, include an attachment with the names and addresses.)				
	Fresno Revitalization Corporation				
	Name 2344 Tulare Street Suite 20	20	Fresno	CA	93721
	Address		City	State	Zip Code
_	Payment Information (Co				
-TI	Date of Payment: 11/12/19 Amount of Payment: (In-Kind FMV) \$ 5,000 (Round to whole dollars.) Payment Type: Monetary Donation or In-Kind Goods or Services (Provide description below.) Brief Description of In-Kind Payment: Donation to build the Fresno Veterans Memorial which is located outside City				
	Hall.	a raymont.			
	Purpose: (Check one and provide description below.)				
	Veterans Memorial which is located outside City Hall.				
 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.				
			1	DIL	
	Executed on	16/21 DATE	- By fary	Such feed NATURE OF ELECTED OFFICER OR CPUC	MEMBER

DATE