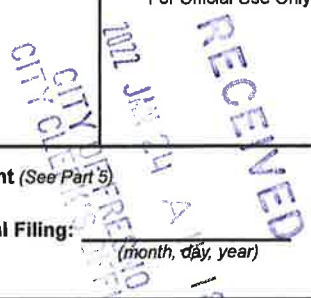


Behested Payment Report

A Public Document

Behested Payment Report

<b>1. Elected Officer or CPUC Member</b> (Last name, First name) Bredefeld, Garry		Date Stamp	<b>California Form 803</b> For Official Use Only 
Agency Name City of Fresno			
Agency Street Address 2600 Fresno Street		<input type="checkbox"/> Amendment (See Part 5) Date of Original Filing: _____ <small>(month, day, year)</small>	
Designated Contact Person (Name and title, if different) Garry Bredefeld, Councilmember			
Area Code/Phone Number (559) 621-8000	E-mail (Optional) Garry.bredefeld@fresno.gov		

**2. Payor Information** (For additional payors, include an attachment with the names and addresses.)

Kashian Enterprises

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Name

265 E. River Park Circle, Ste. 150                      Fresno                      CA                      93720

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Address                      City                      State                      Zip Code

**3. Payee Information** (For additional payees, include an attachment with the names and addresses.)

City of Fresno

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Name

2600 Fresno Street, Suite 2157                      Fresno                      CA                      93721

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Address                      City                      State                      Zip Code

**4. Payment Information** (Complete all information.)

Date of Payment: 12/10/21                      Amount of Payment: (In-Kind FMV) \$ 25,000  
(month, day, year)                      (Round to whole dollars.)

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

Brief Description of In-Kind Payment: Donation made to the new City of Fresno Animal Shelter

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Purpose: (Check one and provide description below.)                       Legislative                       Governmental                       Charitable

Describe the legislative, governmental, charitable purpose, or event: Money was donated to go towards the new City of Fresno Animal Shelter

**5. Amendment Description and/or Comments**

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**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 1/24/22                      By Garry Bredefeld  
DATE                      SIGNATURE OF ELECTED OFFICER OR CPUC MEMBER