benesieu Pa	yment Kept	ort	A Public	Documen	IL	Behested Payment Report
1. Elected Officer or CPUC Member (Last name, First name)					Date Stamp / E	California 803
Bredefeld, Gar	ту				KEOLI	Form For Official Use Only
Agency Name					, F.1	
City of Fresno					2021 NOV 16 A 1	1: 11P
Agency Street Address						n
2600 Fresno Street					CITY OF FRESI	FICE
Designated Contact Person (Name and title, if different)					Amendment (See Part	5)
Garry Bredefeld, Councilmember				1	·	7
Area Code/Phor	ne Number E	-mail (Optional)			Date of Original Filing: _	(month, day, year)
(559) 621-8000) G	Barry.Bredefeld	d@fresno.gov			(
2. Payor Inform	ation (For additi	onal payors, inclu	de an attachment with the	e names and ad	dresses.)	
John R. Lawso	n Rock and Oi	l, Inc.				
Name			_			
P.O. Box 9899			Fresno		CA	93794
Address			City		State	Zip Code
•			ide an attachment with th	e names and ad	ddresses.)	
Fresno Revital	ization Corpora	ation				
2344 Tulare St	reet Suite 200		Fresno		CA	93721
Address			City		State	Zip Code
4. Payment Info	rmation				V-3AII	
Date of Payme Payment Type Brief Descripti	(month, day,	lonetary Dona	tion or \square	In-Kind Goo	\$\frac{10,000}{(Round to whole conds or Services (Provide ans Memorial which is	
Hall.						
	egislative, gov	ernmental, ch	Legislative	☐ Governn or event: ☐	nental ⊠ Char Money was donated t	
Veterans Mem	orial which is id	cated outside	City Hail.			
5. Amendment	Description a	and/or Comi	ments			
6. Verification						
I certify, under pe herein is true and		nder the laws of	the State of California	i, that to the b	est of my knowledge, th	e information contained
Evocuted on	11/16/2	21	By Ja	my Bri	defeel	
Executed on	DATE		Бу	SIGNATURE	OF ELECTED OFFICER OR CPUC	MEMBER