Behested Payment Report   A Public Document

California Form 803

1. Elected Officer or CPUC Member *(Last name, First name)*

Bredefeld, Garry

Agency Name

City of Fresno

Agency Street Address

2600 Fresno Street

Designated Contact Person *(Name and title, if different)*

Garry Bredefeld, Councilmember

Area Code/Phone Number	**E-mail** *(Optional)*
(559) 621-8000	Garry.Bredefeld@fresno.gov

RECEIVED — Date Stamp

2021 NOV 16 A 11: 46

CITY OF FRESNO
CITY CLERK'S OFFICE

☐ **Amendment** *(See Part 5)*

Date of Original Filing: _____ *(month, day, year)*

For Official Use Only

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

Bonadelle Homes, Inc.

Name

7030 N. Fruit Avenue, Suite 101	Fresno	CA	93711
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 200	Fresno	CA	93721
Address	City	State	Zip Code

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

Date of Payment: **4/11/19** *(month, day, year)*

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.

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

Describe the legislative, governmental, charitable purpose, or event: Money was donated to build the Fresno 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.

Executed on **11/16/21** DATE   By _____ *SIGNATURE OF ELECTED OFFICER OR CPUC MEMBER*