

Behested Payment Report

A Public Document

Behested Payment Report

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

RECEIVED Date Stamp

California Form 803 For Official Use Only

Jerry Dyer

Agency Name

City of Fresno

Agency Street Address

2600 Fresno Street, Fresno, CA, 93721

Designated Contact Person (Name and title, if different)

Tim Orman, Chief of Staff to the Mayor

Area Code/Phone Number

559-320-6527

E-mail (Optional)

tim.orman@fresno.gov

Amendment (See Part 5)

Date of Original Filing: 7/19/2021 (month, day, year)

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

Aruna Dua

Name

2008 W. Alluvial

Fresno

CA

93711-0449

Address

City

State

Zip Code

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

One Fresno Foundation

Name

2600 Fresno Street

Fresno

CA

93721

Address

City

State

Zip Code

4. Payment Information (Complete all information.)

Date of Payment: 7/19/2021 (month, day, year)

Amount of Payment: (In-Kind FMV) \$ 15,000.00 (Round to whole dollars.)

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

Brief Description of In-Kind Payment: Sponsorship of Camp Fresno

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

Describe the legislative, governmental, charitable purpose, or event: Sending at-risk youth to summer camp

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 7/19/2021 DATE

By [Signature] SIGNATURE OF ELECTED OFFICER OR CPUC MEMBER