Received 9/29/2025

Behested Payment Report

A Public Document

Type or Print in Ink.

Amendment of Filing	Date Stamp (Agency)	CALIFORNIA FORM 803
☐ Check box if an Amendment / / (Month, Day, Year) # Confirmation Number	RECEIVED 2025 OCT 10 P 5:01 CITY OF FRESNO CITY CLERK'S OFFICE	

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

ELECTED OFFICER OR CPUC MEMBER:	AGENCY NAME:	AGENCY STREET ADDRESS:
Miguel Arias	City of Fresno- Council District 3	2600 Fresno St. Fresno, CA 93721
DESIGNATED CONTACT PERSON (NAME AND TITLE):	**AREA CODE/PHONE NUMBER:**	**E-MAIL:**
Gabriela Olea, Chief of Staff	(559) 621-7834	Gabriela.Olea@fresno.gov

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

NAME:	ADDRESS:	CITY:	STATE:	ZIP CODE:
PG&E	650 O St.	Fresno	CA	93721

☐ Donor Advised Fund (DAF) (see instructions) — DAF NAME: — DONOR(S) AND DONOR'S ADVISOR: (SEE INSTRUCTIONS.)

☐ Payor is a named party or the subject of a proceeding before my agency. — BRIEF DESCRIPTION OF PROCEEDINGS: Downtown Fresno Fiestas Patrias

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

NAME:	ADDRESS:	CITY:	STATE:	ZIP CODE:
Fresno Area Hispanic Foundation	1444 Fulton St.	Fresno	CA	93721

For a **nonprofit organization payee**, provide a brief description of any relationship to the official, official's immediate family member or staff member in the role of founder, salaried employee, decision-making capacity (board member or executive officer) or position on an honorary or advisory board.

NAME AND TITLE:	ROLE WITH THE NONPROFIT ORGANIZATION:	BRIEF DESCRIPTION:

4. Payment Information *(Complete all information. For estimated payment information check the box below.)*

DATE (MONTH/DAY/YEAR)	AMOUNT	PAYMENT TYPE	BRIEF DESCRIPTION OF IN-KIND PAYMENT	PURPOSE	DESCRIBE THE LEGISLATIVE, GOVERNMENTAL, CHARITABLE PURPOSE, OR EVENT:
09/09/2025	$5,000	☒ MONETARY DONATION ☐ IN-KIND GOODS OR SERVICES		☐ LEGISLATIVE ☐ GOVERNMENTAL ☒ CHARITABLE	Downtown Fresno Fiestas Patrias - cultural, community, & economic vitality
		☐ MONETARY DONATION ☐ IN-KIND GOODS OR SERVICES		☐ LEGISLATIVE ☐ GOVERNMENTAL ☐ CHARITABLE	

☐ The (DATE/AMOUNT) is an estimate and reflects my best efforts at obtaining the accurate information. — REASON FOR ESTIMATE:

5. Amendment Description and/or Comments *(Provide date of original filing or confirmation number in Part 1.)*

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 09/29/2025 (DATE) By _____ (SIGNATURE)

From: Gabriela Olea
To: Todd Stermer
Subject: RE: Behested Payment Form - Charitable Contribution
Date: Monday, September 29, 2025 4:52:12 PM
Attachments: CA Form 803 - Fresno Fiestas Patrias 2025.pdf

Hi Todd,

I've attached an 803 Form from Councilman Arias.

Thank you,

Gabriela Olea | Chief of Staff
Office of Council Vice President Miguel A. Arias
City of Fresno, District 3
[redacted]

From: Todd Stermer <Todd.Stermer@fresno.gov>
Sent: Friday, October 11, 2024 2:43 PM
To: Gabriela Olea [redacted]
Subject: RE: Behested Payment Form - Charitable Contribution

Thanks Gabriela! We will process and get it on the website.

Todd Stermer, CMC
City Clerk
[redacted]

From: Gabriela Olea [redacted]
Sent: Friday, October 11, 2024 1:40 PM
To: Todd Stermer <Todd.Stermer@fresno.gov>
Subject: Behested Payment Form - Charitable Contribution

Hi Todd,

I've attached an 803 Form from Councilman Arias.

Thanks,

Gabriela Olea | Chief of Staff
Office of Councilmember Miguel Arias
District 3 – City of Fresno
Office: [redacted]