

Behested Payment Report

A Public Document

Behested Payment Report

1. Elected Officer or CPUC Member (Last name, First name)		RECEIVED San Jose City Clerk Date Stamp 2013 SEP 18 AM 9:29 <i>esp/rtc</i>	California Form 803 For Official Use Only
Reed, Chuck			
Agency Name			
City of San Jose, Mayor's Office			
Agency Street Address		<input type="checkbox"/> Amendment (See Part 5)	
200 E. Santa Clara Street, 18th Floor, San Jose, CA 95113		Date of Original Filing: <u>9/17/2013</u> <small>(month, day, year)</small>	
Designated Contact Person (Name and title, if different)			
Barbara Howard, Executive Assistant to the Mayor			
Area Code/Phone Number	E-mail (Optional)		
408-535-4800	mayoremail@sanjoseca.gov		

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

Richard J. Riordan c/o J. Arthur Greenfield & CO. LLP

Name			
10880 Wilshire Blvd # 800	Los Angeles	CA	90024
Address	City	State	Zip Code

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

San Jose Silicon Valley Chamber of Commerce

Name			
101 W. Santa Clara Street	San Jose	CA	95113
Address	City	State	Zip Code

4. Payment Information (Complete all information.)

Date of Payment: 8/15/2013 Amount of Payment: (In-Kind FMV) \$ 50,000
(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: _____

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

Describe the legislative, governmental, charitable purpose, or event: Policy analysis for statewide pension reform.

5. Amendment Description 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 9/17/13
DATE

By Chuck Reed
SIGNATURE OF ELECTED OFFICER OR CPUC MEMBER