

Behested Payment Report

A Public Document

Behested Payment Report

17 DEC 27 10:18AM

CITY CLERK

California Form 803

For Official Use Only

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

John J. Kennedy  
Agency Name

City of Pasadena  
Agency Street Address

100 N. Garfield Avenue Suite  
Designated Contact Person (Name and title, if different)

Jana West, Council District Liaison

Area Code/Phone Number E-mail (Optional)  
626-744-4738

Date Stamp

Amendment (See Part 5)

Date of Original Filing: \_\_\_\_\_  
(month, day, year)

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

CP IV Corson Street, LLC  
Name

707 17th Street, Suite 3050 Denver CO 80202  
Address City State Zip Code

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

Mickey Bearman Company  
Name

6820 Wilson Avenue Los Angeles CA 90001  
Address City State Zip Code

4. Payment Information (Complete all information.)

Date of Payment: 12/20/17 Amount of Payment: (In-Kind FMV) \$ 5,000.00  
(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: Supported the purchase of turkeys for District 3 Community Meeting & Holiday Gathering

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

Describe the legislative, governmental, charitable purpose, or event: \_\_\_\_\_

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 12/22/17  
DATE

By   
SIGNATURE OF ELECTED OFFICER OR CPUC MEMBER