Behested Payment Report	A Public Docume	ent William	Behested Payment Report
1. Elected Officer or CPUC Member (Last	name, First name)	Date Stamp	California 803
Lee, Edwin M.		FIL	Form For Official Use Only
Agency Name		14 FEB 12	PH 2: 35
Office of the Mayor Agency Street Address			
		SAN FRA	HCISCO HMISCINE
City Hall, Room 200, 1 Dr. Carlton B. Goodlett Place, S.F., CA 94102  Designated Contact Person (Name and title, if different)			
Olga A. Ryerson		Amendment (See Part 5)	
Area Code/Phone Number E-mail (Optional)		Date of Original Filing: _	(month, day, year)
(415) 554-6910 olga.ryerson@	sfgov.org		(Month, day, year)
2. Payor Information (For additional payors, inc.	lude an attachment with the names and	addresses.)	noga metalik 1978 di 1954, uni 1964 si 1984 si pamba ndi 1981 dia piana na nanggi pagi manaba ka dia dia
Kilroy Realty Corporation			
Name			
	Los Angeles	CA	90064
Address	City	State	Zip Code
3. Payee Information (For additional payees, inc	clude an attachment with the names and	addresses.)	
America's Cup Organizing Committee (ACC	OC)		
Name	0 5	0.4	0.4444
Address	San Francisco City	CA State	94111 Zip Code
4. Payment Information (Complete all information)	•		NUMBER OF STREET CONTRACTOR OF
		<b>\$500,000</b>	
Date of Payment:1/31/2014	Amount of Payment: (In-Kind Fi	(Round to whole contact for the following formula: MV) $(Round to whole contact for the following fo$	lollars.)
Payment Type: ⊠ Monetary Don	ation <b>or</b> ☐ In-Kind G	oods or Services (Provide	description below.)
Brief Description of In-Kind Payment:			
Purpose: (Check one and provide description below.)	☐ Legislative         ☐ Govern	nmental 🔲 Chari	itable
Describe the legislative, governmental, o		America's Cup Organi	
		anaissa Amariasla Cun	
(ACOC) - To help pay for costs associated	with the City hosting the San Fi	ancisco America's Cup.	
5. Amendment Description or Commen	ts		
			The section of the control of the section of the se
6. Verification	MAIN THE		
	of the State of Colifornia that to the	heat of my knowledge, the	information contained
I certify, under penalty of perjury under the laws herein is true and complete.	or the State of California, that to the	best of my knowledge, the	e information contained
F-1 10 0011			
Executed on February 10, 2014	Bysignatur	RF OF ELECTED OFFICER OR CPUC	MEMBER