

Behested Payment Report

A Public Document

Behested Payment Report

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

Gascon, George

Agency Name: San Francisco District Attorney's Office

Agency Street Address: 850 Bryant Street, Suite 322 San Francisco, CA 94103

Designated Contact Person (Name and title, if different): Tara Anderson Policy and Grant Manager

Area Code/Phone Number: 415-553-1203; E-mail (Optional): Tara.Anderson@sfgov.org

Date Stamp: 2014 MAR 10

California Form 803 For Official Use Only

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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.)

Sojourn to the Past

Name: [Redacted] Address: [Redacted] City: San Francisco State: CA Zip Code: 94066

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

Silicon Valley Community Foundation

Name: [Redacted] Address: [Redacted] City: Mountain View State: CA Zip Code: 94040-1498

4. Payment Information (Complete all information.)

Date of Payment: Mar. 3, 2014 Amount of Payment: (In-Kind FMV) \$ 18,400.00

Payment Type: [X] 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 [X] Charitable Describe the legislative, governmental, charitable purpose, or event: Support for collaborative pilot education program initiated by the San Francisco District Attorney's Office.

5. Amendment Description or Comments

Support for collaborative "I Am the Change" pilot program (DAs office with Bayview Hunter's Point YMCA and Sojourn to the Past), to engage SF truant youth in the nationally honored Sojourn to the Past living history, academic immersion journey designed to motivate them toward personal success and civic responsibility. Support will provide for the identified participants' curriculum materials and books, air/on ground moving classroom travel, lodging, meals, museum entrance fees, speaker honorariums, security, transporting instructional equipment, videography, rental of classroom space.

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 3-7-14 DATE

By [Redacted Signature] SIGNATURE OF ELECTED OFFICER OR CPUC MEMBER