

Behested Payment Report

A Public Document

Behested Payment Report

1. Elected Officer or CPUC Member (Last name, First name) Gascon, George Date Stamp 14 AUG 15 PM 2:09 **California Form 803**
 Agency Name San Francisco District Attorney's Office **For Official Use Only**
 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 Amendment (See Part 5)
 Area Code/Phone Number 415-553-1203 E-mail (Optional) Tara.Anderson@sfgov.org 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 _____
 Address [Redacted] San Francisco CA 94066
 City State Zip Code

3. Payee Information (For additional payees, include an attachment with the names and addresses.)
 Nader Marvi
 Name _____
 Address [Redacted] San Francisco California 94123
 City State Zip Code

4. Payment Information (Complete all information.)
 Date of Payment: 07/22/14 Amount of Payment: (In-Kind FMV) \$ 500.00
 (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: Support for collaborative pilot education program initiated by the San Francisco District Attorney's Office.
 Purpose: (Check one and provide description below.) Legislative Governmental 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 the Bayview Hunters 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 videography the identified participants' curriculum materials and books, air/on ground moving classroom travel, lodging, meals, museum entrance fees, speaker honorariums, security, transporting instructional equipment, 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 7-13-14 By [Redacted]
 DATE SIGNATURE OF ELECTED OFFICER OR CPUC MEMBER