Behested Payment Report **A Public Document**

Behested Payment Report

California Form **803**

For Official Use Only

Date Stamp

2019 MAY 10

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

Cox, Greg

Agency Name

County of San DIego

Agency Street Address

1600 Pacific Highway, Room 335, San Diego, CA 92101

Designated Contact Person *(Name and title, if different)*

Danny Melgoza, Chief of Staff

Area Code/Phone Number

619-531-5511

E-mail *(Optional)*

Danny.Melgoza@sdcounty.ca.gov

☐ **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.)*

Dianne Bashor

Name

Address	City	State	Zip Code
4627 Ruffner Street	San Diego	CA	92111

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

San Diego Imperial Council, Boy Scouts of America

Name

Address	City	State	Zip Code
1207 Upas Street	San Diego	Ca	92103

4. Payment Information *(Complete all information.)*

Date of Payment: 5/8/2019 *(month, day, year)*

Amount of Payment: *(In-Kind FMV)* $ 200,000.00 *(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: Boy Scout campground at Otay Lakes County Park

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 5/8/2019 (DATE) By Greg Cox (SIGNATURE OF ELECTED OFFICER OR CPUC MEMBER)