

Behested Payment Report

A Public Document

Behested Payment Report

<b>1. Elected Officer or CPUC Member</b> (Last name, First name) Cox, Greg		Date Stamp 20 9 SEP 26 PM 2: 5	<b>California 803</b> Form For Official Use Only
<b>Agency Name</b> County of San Diego		CLERK OF THE BOARD OF SUPERVISORS	
<b>Agency Street Address</b> 1600 Pacific Highway, Room 335, San Diego, CA 92101			
<b>Designated Contact Person</b> (Name and title, if different) Danny Melgoza, Chief of Staff			<input type="checkbox"/> <b>Amendment</b> (See Part 5)
<b>Area Code/Phone Number</b> 619-531-5511	<b>E-mail</b> (Optional) Danny.Melgoza@sdcounty.ca.gov	<b>Date of Original Filing:</b> _____ (month, day, year)	

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

Al Assad  
Name

5550 Baltimore Drive, 2nd floor                      La Mesa                      CA                      91942  
Address    City    State    Zip Code

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

San Diego Imperial Council, Boy Scouts of America  
Name

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

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

**Date of Payment:** 08/15/19                      **Amount of Payment:** (In-Kind FMV) \$ 10,000.00  
(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:** \_\_\_\_\_

\_\_\_\_\_

**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**

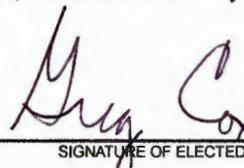
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\_\_\_\_\_

\_\_\_\_\_

**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 9/15/19                      By   
DATE    SIGNATURE OF ELECTED OFFICER OR CPUC MEMBER