

Behested Payment Report

A Public Document

Behested Payment Report

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

choi, Steven

CITY CLERK'S OFFICE

California Form 803

For Official Use Only

Agency Name

City of Irvine

APR 30 PM 4:30

Agency Street Address

1 Civic Center plaza, Irvine 92623

Designated Contact Person (Name and title, if different)

Amendment (See Part 5)

Area Code/Phone Number

(949) 331-2294

E-mail (Optional)

drstevenc Choi@gmail.com

Date of Original Filing:

(month, day, year)

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

US Bank

Name

13070 Yale Ave, Irvine, CA 92620

Address

City

State

Zip Code

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

OCEKEC - Irvine Korean Cultural Festival

Name

14271 Jeffrey Road, Suite 263, Irvine, CA 92620

Address

City

State

Zip Code

4. Payment Information (Complete all information.)

Date of Payment:

4/28/2015

(month, day, year)

Amount of Payment: (In-Kind FMV) \$

5,000.00

(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:

To sponsor a Korean Cultural Festival

5. Amendment Description 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

4/28/15

DATE

By

[Signature]

SIGNATURE OF ELECTED OFFICER OR CPUC MEMBER