

# Behested Payment Report

# A Public Document

Behested Payment Report

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

City of Santa Ana

Agency Name

20 Civic Center Plaza

Agency Street Address

Michele Martinez, Councilmember, Ward 2

Designated Contact Person (Name and title, if different)

Area Code/Phone Number

714 647-5200

E-mail (Optional)

Date Stamp

2013 MAR 28 PM 6:17

California Form 803

For Official Use Only

☐ Amendment (See Part 5)

Date of Original Filing: 03/28/2013  
(month, day, year)

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

Ryan Ogulnick, CEO of Vineyards Development Corp.

Name

Address

City

State

Zip Code

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

Name

Address

City

State

Zip Code

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

Date of Payment: 03/13/2013  
(month, day, year)

Amount of Payment: (In-Kind FMV) \$ \$5,000  
(Round to whole dollars.)

Payment Type: ☒ Monetary Donation or ☐ In-Kind Goods or Services (Provide description below.)

Brief Description of In-Kind Payment: Evergreen Cedar-Grove Community Center Fundraiser

Purpose: (Check one and provide description below.) ☐ Legislative ☐ Governmental ☒ Charitable

Describe the legislative, governmental, charitable purpose, or event:

## 5. Amendment Description or Comments

## 6. Verification

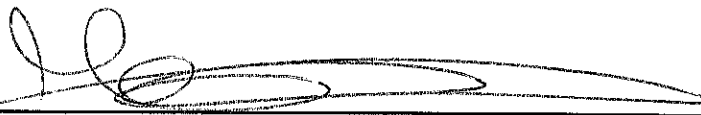
I certify, under penalty of perjury under the laws of the State of California, that to the best of my knowledge, the information contained herein is true and complete.

Executed on

3/28/2013

DATE

By



SIGNATURE OF ELECTED OFFICER OR CPUC MEMBER