## Behested Payment Report

### 1. Elected Officer or CPUC Member

**Name:** Robert Garcia  
**Agency Name:**  
**City of Long Beach**  
**Agency Street Address:** 333 W. Ocean Blvd  
**Designated Contact Person:** Mark Taylor  
**Area Code/Phone Number:** 562-570-6801  
**E-mail (Optional):** mayor@longbeach.gov

### 2. Payor Information

**Name:** Walmart Stores, Inc.  
**Address:** 702 SW 8th Street, Bentonville, AR 72716

### 3. Payee Information

**Name:** Green Education Inc  
**Address:** PO Box 2629, Long Beach, CA 90801

### 4. Payment Information

**Date of Payment:** 1/17/2018  
**Amount of Payment:** $10,000.00  
**Payment Type:** ☑ Monetary Donation  
**Brief Description of In-Kind Payment:**  
**Purpose:** ☑ Charitable  
Describe the legislative, governmental, charitable purpose, or event: To support sustainable efforts in Long Beach

### 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:** 2/5/18
Behested Payment Report

1. Elected Officer or CPUC Member (Last name, First name)
   Robert Garcia
   Agency Name
   City of Long Beach
   Agency Street Address
   333 W. Ocean Blvd
   Designated Contact Person (Name and title, if different)
   Mark Taylor
   Area Code/Phone Number
   562-570-6801
   E-mail (Optional)
   mayor@longbeach.gov

2. Payor Information (For additional payors, include an attachment with the names and addresses.)
   Walmart Stores, Inc.
   Name
   702 SW 8th Street
   Address
   Bentonville
   City
   AR
   State
   72716
   Zip Code

3. Payee Information (For additional payees, include an attachment with the names and addresses.)
   Willmore City Heritage Association
   Name
   PO Box 688
   Address
   Long Beach
   City
   CA
   State
   90801
   Zip Code

4. Payment Information (Complete all information.)
   Date of Payment: 1/17/2018
   (month, day, year)
   Amount of Payment: (In-Kind FMV) $15,000.00
   (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.)
   ☑ Charitable
   ☐ Legislative
   ☐ Governmental
   Describe the legislative, governmental, charitable purpose, or event:
   To support efforts in Long Beach's Willmore Neighborhood's preservation, protection and improvement of the physical environment and quality of life.

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 2-6-18
DATE

By
SIGNATURE OF ELECTED OFFICER OR CPUC MEMBER

FPPC Form 803 (December/2015)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)