


Behested Payment Report

A Public Document

Behested Payment Report

1. Elected Officer or CPUC Member <i>(Last name, First name)</i>		Date Stamp (Agency)	California Form For Official Use Only FPPC date stamp: 
Agency Name (File Form with your Local or State Agency)			
Agency Street Address			
Designated Contact Person <i>(Name and title of staff member, if different from filer)</i>		<input type="checkbox"/> Are you filing an Amendment?	
Area Code/Phone Number	E-mail (optional)	If Amending provide Date of Original Filing: _____ <i>(month, day, year)</i>	
<i>(See Part 5 to explain details)</i>			

2. Payor Information *(Single Source of Behested Payments of \$5,000 or above in the aggregate, in a Calendar Year)* *(For reporting additional payors include an attachment with the names and addresses, please file a separate Form 803)*

Name			
Address	City	State	Zip Code

Payor:
 Matter pending before your agency involving Payor Not pending

Brief Description of Pending Decision: _____

3. Payee Information *(For additional payees and payments from the same payor, please attach a separate spreadsheet [template link] or include attachment with names and addresses, and payment information)*

Name			
Address	City	State	Zip Code

Affiliation with the Payee:

- Founder of payee organization
- Filer or filer's immediate family member, filer's staff, or filer's campaign committee staff an employee or board member of the payee
- No affiliation

Brief Description of Affiliation: _____

4. Payment Information *(Complete all information.) (For additional payments from this payee, include the spreadsheet [template link] to provide the date, amount, type, and description of any goods, services provided or purchased.)*

Date of Payment: _____ **Amount of Payment:** *(In-Kind FMV)* \$ _____
(month, day, year) *(Round to whole dollars.)*

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

Brief Description of In-Kind Payment: _____

Payment Purpose:

(Check one and provide description below.)

Legislative Governmental Charitable

Describe with specificity the legislative, governmental, charitable purpose of the payment, or the purpose of the event:

(Example: the payment was for goods and services: Payor provided a lunch buffet for 20 people attending a government workshop to study housing issues, and travel costs for me to attend.)

Did the payment result in any personal benefit to you or an immediate family member. (If so gift or other reporting provisions and limitations under the Act may apply)

Provide a Brief explanation of any personal benefit:

(Example: Yes, I was provided with a free meal and travel costs to attend the event.)

Multiple officials were involved in making a behest at this event or in conjunction with your behest

5. If this filing is an Amendment of a previous filing, check the box at the top of the form, and note the original filing date. 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 _____ DATE

By _____

SIGNATURE OF ELECTED OFFICER OR CPUC MEMBER

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FPPC Form 803 (January/2018)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Behested Payment Report

FORM

803

Form 803 is used by elected officers and members of the California Public Utilities Commission (CPUC) to disclose payments made at their behest, principally for legislative, governmental, or charitable purposes. This form was prepared by the Fair Political Practices Commission (FPPC) and is available at www.fppc.ca.gov.

When to File

- File Form 803 within 30 days following the date on which the payment(s) meets or exceeds \$5,000 in the aggregate from a single source in a calendar year. (Section 84224.)
- Once a single source has made a behested payment of \$5,000 or more during the calendar year, subsequent payments of any amount from that source must be reported **on a Form 803.**

Where to File

State Officials: The official's state agency must receive Form 803 within 30 days of the date the behested payment is made. Within 30 days after receipt of the report, the state agency must forward a copy to the FPPC at:

1102 Q Street, Suite 3000, Sacramento, CA 95811
Fax: 916-322-0883, E-mail: Form803@fppc.ca.gov

E-filing Option: The state official may e-file at: [Form 803](#)

Do not forward a hard copy when using e-file or duplicate forms may be recorded

Local Officials: The official's local agency must receive Form 803 within 30 days of the date the behested payment is made. Within 30 days after receipt of the report, the agency must forward a copy to the filing officer who receives the official's original campaign statements. **Local officials do not file with the FPPC.**

General Information: Behested payments are payments made principally for legislative, governmental, or charitable purposes under Government Code Section 82004.5. These payments are not for personal or campaign purposes. Generally, a donation is made at the behest if it is requested, solicited, or suggested by the official, or otherwise made to a person in cooperation, consultation, coordination with, or at the consent of, the elected officer or CPUC member. This also includes payments behested by the official's agent or employee on the official's behalf.

Exception: If the behested payment is made by a state, local, or federal government agency and is principally for legislative or governmental purposes, the payment does not have to be

reported.

Privacy Information Notice: Information requested by the FPPC is required by and used to administer and enforce the Political Reform Act. Failure to provide information may be a violation subject to administrative, criminal, or civil penalties. All reports and statements are public records available for inspection and reproduction. If you have any questions, please contact the FPPC's General Counsel at 1102 Q Street, Suite 3000, Sacramento, CA 95811 or (916) 322-5660.

Instructions

Part 1 - Identification: Identify the official's name, agency, address, and designated contact person for the filer (if different) information.

Mark the amendment box if changing information on a previously filed Form 803 and include the date of the original filing.

Part 2 - Payor Information: Disclose the name and address of the person making the payment. A business address is acceptable. Provide information as to any pending matters involving the payor before the filer.

Part 3 - Payee Information: Identify the name and address of the person receiving the payment. A business address is acceptable. Provide information regarding any affiliation of the filer to the payee such as filer's immediate family members, office staff or campaign committee members employed by or on a decision-making body for the payee.

Part 4 - Payment Information: Disclose the payment date and amount using the fair market value (FMV) for donated in-kind goods or services. Check one box to identify the type of payment and provide a description if the payment is an in-kind good or service. Check one box to identify the charitable, legislative or governmental purpose and provide a description of the event or purpose of the payment with specificity. If the payment also results in a personal benefit to the filer or the filer's immediate family member, check the box and provide an explanation

Part 5 - Amendment Description or Comments: Complete this section only if amending a previously filed Form 803 or to provide additional or clarifying information. Be certain to check the amendment box in Part 1.

Part 6 - Verification: Date and sign the form under penalty of perjury.

Suggested Information to Request from Payee at the Time of the Behest

Due to the Form 803 filing timeline (within 30 days from which the threshold is met or exceeded from a single source in a calendar year) the Commission has created the following standard questions to send to the payor of the behested payment. It is recommended that these questions are sent *as soon as possible* by the official making the behest or acting in cooperation with a solicitation for payment in order to meet the reporting deadline.

1. What is the name and address of the entity or person (payor) making the behested payment?
2. What is the name and address of the recipient (payee) of the behested payment?
3. Please provide the following information about the payment:
 - a. Date;
 - b. Amount; and
 - c. Type of Payment;
 - i. monetary donation; or
 - ii. in-kind goods or services with a description of the payment.
4. Please provide a brief description of the payment or event in which the behested payment transpired and the purpose for the behested payment.