150400

Payment to Agency Report A Public Document 1. Agency Name					mp	California on	
California Energy Commission					. . .	Form OU	
Division, Department, or Reg	gion (if applicable)			For Official Use Only			
Small Offices / Commissioners Office							
Street Address							
1516 9th Street							
Area Code/Phone Number	Email			Amendment (ex		in comment section)	
(916) 651-6176	kevin.barker@en	kevin.barker@energy.ca.gov			Amendment (explain in comment section)		
Agency Contact (name and title)				Date of Original Filing:(month, day, year)			
Kevin Barker, Chief of Staf	f to Chair Robert B.	Weisenmiller				(monut, dd); youry	
. Donor Name and Addre	ess						
			☑ Other	Gridworks			
Last Name	First	Name	I Otner			Name	
426 17th Street, Suite 700		Oakland			CA	94612	
Address		City			State	Zip Code	
Gridworks' mission is to co	nvene, educate and	ampower stake					
		i empower staker	nolders work	king to decarb	onize ele	ectricity grids.	
If "Other" is marked, describe the entity	Sub-Schulen wordt in contracted a bore contracted	 GLASS AND GLASS AND A PROVINCE 	NEW CELLE	ting to decarb	onize ele	ectricity grids.	
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3.3. Identify the officials who used the payment in Section 3.1 (See instructions)

Barker	Kevin	Chief of Staff	SmallOffices/Commissioner	
Last Name	First Name	Position/Title	Department/Division	
McLean	Christopher	Analyst	STEP Division	
Last Name	First Name	Position/Title	Department/Division	

4. Verification

I authorized the accept	ance of the	e reported paymer	nt(s) as in compliance w	vith FPPC regulations.
	1 1 1.			

Chief Deputy Director Courtney Smith cu Title Print Name Signatur (month, day, year)

Comment:

(Use this space or an attachment for any additional information)

