

Tickets Provided by Agency Report

A Public Document

TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name City of San Jose		Date Stamp San Jose City C 2009 AUG 12 A 11:47	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) Council District 1			
Street Address 200 E. Santa Clara Street, Tower 18th Floor			
Area Code/Phone Number (408) 535-4901	E-mail district1@sanjoseca.gov	<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)	
Agency Contact (name and title) Rhovy Cansino, Council Aide			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 04 / 10 / 09 Description of Event: Stealth vs. Colorado
 _____ / _____ / _____ Face Value of Ticket: \$ 50.00

Agency Event Yes No (Identify source of tickets below.)
 Name of Outside Source of Ticket(s) Provided to Agency: San Jose Arena Authority
 Number of Tickets Received: 16 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
Cansino, Rhovylynn	2	Host for staff recognition event.

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: City of San Jose

Name of Individual or Organization: PRNS - Starbird Teen Center Number of Tickets: 14

Description of Organization: City-owned facility

Address of Organization: 1050 Boynton Ave. San Jose, CA 95117
 Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
Staff recognition event.

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

 Pete Constant Councilmember 08/11/09
 Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)