

**Tickets Provided by Agency Report**

**A Public Document**

TICKETS PROVIDED BY AGENCY REPORT

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

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 07 / 23 / 09 Description of Event: An Evening with Il Divo  
 \_\_\_\_\_ Face Value of Ticket: \$ 130

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
Constant, Pete	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: Office of the City Clerk Number of Tickets: 14

Description of Organization: City Department

Address of Organization: 200 E. Santa Clara Street, Wing 2nd Floor San Jose, CA 95113  
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.)