

**Tickets Provided by Agency Report**

**A Public Document**

TICKETS PROVIDED BY AGENCY REPORT

<b>1. Agency Name</b> City of San Jose		<p>RECEIVED San Jose City Clerk Date Stamp 2010 JUN 17 A 10:03</p>	<p><b>California Form 802</b> For Official Use Only</p>
Division, Department, or Region (if applicable) Council District 6			
Street Address 200 E. Santa Clara St 18th Floor Tower			
Area Code/Phone Number 408 535-4906	E-mail tina.west@sanjoseca.gov	<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: <u>06/16/2010</u> (month, day, year)	
Agency Contact (name and title) Tina West, Executive Administrative Assistant			

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

Date(s) of Event: 11 / 13 / 09 Description of Event: Leonard Cohen World Tour 2009 Concert  
 \_\_\_\_\_  
 \_\_\_\_\_ Face Value of Ticket: \$ 182.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: \_\_\_\_\_  
 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
N/A		

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

Name of Behesting Agency Official: \_\_\_\_\_  
 Name of Individual or Organization: Friends of San Jose Rose Garden (Terry Reilly) Number of Tickets: 16  
 Description of Organization: Master Senior Volunteers performing necessary maintenance & upkeep to garden.  
 Address of Organization: 1375 Emory St., San Jose, CA 95126  
Number and Street City State Zip Code  
 Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
Volunteer recognition (Terry Reilly, Founder of Organization rec'd tickets for distribution to the volunteers.)

**5. Verification**

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

Tina West Tina West Executive Administrative Asst 06/16/2010  
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.)