

**Tickets Provided by Agency Report**

**A Public Document**

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TICKETS PROVIDED BY AGENCY REPORT

<b>1. Agency Name</b> City of San Jose		Date Stamp San Jose City Clk 2010 DEC 14 P 4:00	California Form <b>802</b> For Official Use Only
Division, Department, or Region (if applicable) Council District 1			
Street Address 200 E. Santa Clara Street, Tower 18th Floor		<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)	
Area Code/Phone Number (408) 535-4901	E-mail district1@sanjoseca.gov		
Agency Contact (name and title) Rhovy Antonio, Council Aide			

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

Date(s) of Event: 12 / 18 / 10 Description of Event: Radio City Christmas Spectacular  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 102

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
Morrison, Stephanie	1	Host of community recognition event.

**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: Lynhaven Elementary PTA Number of Tickets: 15  
 Description of Organization: Community Group  
 Address of Organization: 831 Cypress Avenue San Jose CA 95112  
Number and Street City State Zip Code  
 Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
Community 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 12/14/10  
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.)