

Tickets Provided by Agency Report

A Public Document

TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name City of San Jose		RECEIVED Date Stamp San Jose City Clerk 2010 JUN 22 P 1:19	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) Council District 4			
Street Address 200 E Santa Clara Street			
Area Code/Phone Number 408/535-4904	E-mail district4@sanjoseca.gov		
Agency Contact (name and title) Stephanie Fong, District Director		<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)	

2. Event For Which Tickets Were Distributed

Date(s) of Event: 02 / 09 / 10 Description of Event: SAP Open (16 Suite Tickets, 8 Club Seats)
 _____ / _____ / _____ Face Value of Ticket: \$ \$32/\$54

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: 24 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

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: Berryessa Senior Advisory Council Number of Tickets: 24

Description of Organization: City-supported senior citizen organization consisting of volunteered members.

Address of Organization: 5030 Berryessa Road, San Jose, CA 951132
Number and Street City State Zip Code

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

5. Verification

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

 Kansen Chu Councilmember 06/22/10
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.)
