Tickets Provided by Agency Report

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TICKETS PROVIDED BY AGENCY REPORT

California Form 802

For Official Use Only

Date Stamp

1. Agency Name
Tracy Wilson Teen Program – City of San Jose

Division, Department, or Region *(if applicable)*
Parks, Recreation, Neighborhood Services

Street Address
3590 Cas Drive

Area Code/Phone Number
408-794-1690

E-mail
darryl.tapaha@sanjoseca.gov

Agency Contact *(name and title)*
Darryl Tapaha, Senior Recreation Leader

☐ **Amendment** *(Must explain in Part 5.)*

Date of Original Filing: _____ *(month, day, year)*

2. Event For Which Tickets Were Distributed

Date(s) of Event: 11 / 30 / 10 Description of Event: Sharks vs. Detroit

___ / ___ / ___ Face Value of Ticket: $ 115

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: 8 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
Tapaha, Darryl	8	Take program participants to sharks game

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

Name of Behesting Agency Official: Darryl Tapaha

Name of Individual or Organization: Tracy Wilson Teen Program Number of Tickets: 8

Description of Organization: Teen program

Address of Organization: 3590 Cas Drive (Number and Street) San Jose (City) CA (State) 95111 (Zip Code)

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
Take program participants to sharks game

5. Verification

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

[signature] (Signature of Agency Head or Designee) Darryl Tapaha (Print Name) Sr. Rec Leader (Title) 12/3/10 (month, day, year)

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