

Tickets Provided by Agency Report

A Public Document

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TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name

Date Stamp
2010 JAN 22 A 8:44

California Form **802**

UTIMA ADULT & FAMILY SERVICES
Division, Department, or Region (if applicable)

2681 ZANKER RD #B SAN JOSE 95134
Street Address

Area Code/Phone Number

E-mail

408-928-1700

YVONNE@UTIMAAGENSOY.ORG

Amendment (Must explain in Part 5.)

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

Agency Contact (name and title)

YVONNE MAXWELL

2. Event For Which Tickets Were Distributed

Date(s) of Event: 1/17/10

Description of Event: HARLEM GLOBETROTTERS

Face Value of Ticket: \$ 160.50

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
MAXWELL, YVONNE	16	DISTRIBUTION TO CLIENTS & FAMILIES

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

Name of Behesting Agency Official: SJAA

Name of Individual or Organization: _____ Number of Tickets: _____

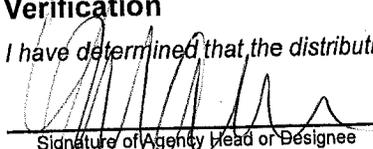
Description of Organization: _____

Address of Organization: _____
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.

Signature of Agency Head or Designee:  YVONNE MAXWELL EXEC. DIRECTOR 1/19/10
Print Name Title (month, day, year)

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