

Tickets Provided by Agency Report

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San Jose City Clerk

TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name <i>CITY OF SAN JOSE</i>		Date Stamp: <i>3</i>	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) <i>OFFICE OF THE CITY ATTORNEY</i>			
Street Address <i>200 EAST SANTA CLARA ST., #16 FLOOR SAN JOSE, CA 95113</i>			
Area Code/Phone Number <i>(408) 535-1900</i>	E-mail <i>DANIEL.TONG@SANJOSECA.GOV</i>	<input type="checkbox"/> Amendment (Must explain in Part 5.)	
Agency Contact (name and title) <i>DANIEL TONG, CHIEF OF STAFF</i>		Date of Original Filing: _____ (month, day, year)	

2. Event For Which Tickets Were Distributed

Date(s) of Event: *03/25/11* Description of Event: *CIRQUE DU SOLEIL QUIDAM*
 _____ Face Value of Ticket: \$ *103.00*

Agency Event Yes No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: *N/A*

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
<i>ANGLIN, NICHOLE</i>	<i>1</i>	<i>EMPLOYEE RECOGNITION EVENT</i>
<i>CARDOZA, STACKY</i>	<i>1</i>	<i>" " "</i>
<i>HALTON, RUTH</i>	<i>1</i>	<i>" " "</i>

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: _____ 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.

