

Tickets Provided by Agency Report

A Public Document

TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name <u>City of San Jose</u>		RECEIVED San Jose City Clerk 2012 JAN 26 P 4: 04	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) <u>District 8</u>			
Street Address <u>700 E. Santa Clara St S.J. CA</u>		<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)	
Area Code/Phone Number <u>408 535-4908</u>	E-mail <u>maryanne.groen@sanjoseca.gov</u>		
Agency Contact (name and title) <u>Mary Anne Groen - Chief of Staff</u>			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 9, 23, 11 Description of Event: Shark vs Duck
 Face Value of Ticket: \$ 205

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: 110 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
<u>Mary Anne Groen</u>	<u>1</u>	<u>Host</u>
<u>Shelley Opsal</u>	<u>1</u>	<u>Host</u>
<u>Merge Unit</u>	<u>14</u>	

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

Name of Behesting Agency Official: Councilmember Idarkeva

Name of Individual or Organization: S.J. Police Merge Unit Number of Tickets: 110

Description of Organization: Mobile Emergency Response Group and Equipment

Address of Organization: 201 W. Mission S.J. CA
 Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
Thank You & Morale

5. Verification

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

Mary Anne Groen Mary Anne Groen Chief of Staff 1/26/12
 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.)