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San Jose City Clerk

Tickets Provided by
Agency Report

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TICKETS PROVIDED BY
AGENCY REPORT

California
Form **802**
For Official Use Only

1. Agency Name
City of San Jose

Division, Department, or Region (if applicable)
Council District 9

Street Address
200 E Santa Clara St. San Jose CA 95113

Area Code/Phone Number
408 535-4909

E-mail
Diana.Jamison@sanjose.ca.gov

Agency Contact (name and title)
Donald Rocha, Councilmember

Date Stamp

Amendment (Must explain in Part 5.)

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

2. Event For Which Tickets Were Distributed

Date(s) of Event: 2/1/11 Description of Event: SHARKS Game

Face Value of Ticket: \$ 71.00

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: 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
<u>Councilmember Rocha</u>	<u>16</u>	<u>Donated to Cambrian community council.</u>

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

Name of Behesting Agency Official: Councilmember Donald Rocha

Name of Individual or Organization: Cambrian Community Council Number of Tickets: 16

Description of Organization: Cambrian Community Council is an elected group of community volunteers dedicated to improving the community.

Address of Organization: 4115 Jackson Dr. San Jose CA 95124

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

IN RECOGNITION OF THEIR EFFORTS AS LIASION BETWEEN COUNCIL OFFICE AND THE COMMUNITY

5. Verification

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

