

Tickets Provided by Agency Report

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TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp	California Form 802
City of San Jose, HR Department		RECEIVED San Jose City Clerk 2011 JUL 26 P 2:10	For Official Use Only
Division, Department, or Region (if applicable)			
200 E. Santa Clara St., Wing 2nd Floor			
Street Address			
San Jose, CA 95113			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ <small>(month, day, year)</small>	
408-535-8155	alex.gurza@sanjoseca.gov		
Agency Contact (name and title)			
Alex Gurza, Deputy City Manager/HR Director			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 3 / 3 / 11 Description of Event: Sharks game
 _____ / _____ / _____ Face Value of Ticket: \$ 192.00

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

Name of Outside Source of Ticket(s) Provided to Agency: _____

Number of Tickets Received: 11 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
Attached		

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

Name of Behesting Agency Official: Mark Danaj, Human Resources Director

Name of Individual or Organization: City of San Jose Number of Tickets: 11

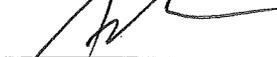
Description of Organization: local government

Address of Organization: 200 E. Santa Clara St. Wing 2nd Floor, San Jose, CA 95113
Number and Street City State Zip Code

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

5. Verification

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

 ALEX GURZA DEPUTY CITY MANAGER 7-21-11
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.)

**Tickets Provided by
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Continuation Sheet**

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3. Agency Official(s) Receiving Ticket(s)

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
Nunes, Sarah	1	Employee Recognition
Wright, Kelly	1	"
Barragan, Irene	1	"
Harding, Lisa	1	"
Garcia, Erica	1	"
Bieganski, Leanna	1	"
Stiles, Jeff	1	"
Marcussen, George	1	"
LoFranco, Delanie	1	"
Bettencourt, Renee	1	"
Ortiz, Sally	1	"