

**Agency Report of:**

**Ceremonial Role Events and Ticket/Pass Distributions**

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<b>1. Agency Name</b> City of San Jose Division, Department, or Region (If Applicable) Council District 10 Office Designated Agency Contact (Name, Title) Laura Cowan, Community Relations Coordinator Area Code/Phone Number   E-mail 408-535-4979   laura.cowan@sanjoseca.gov		Date Stamp 2012 JUN 32 PM 12:38	California Form <b>802</b> For Official Use Only
		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: _____ (Month, Day, Year)	

**2. Function or Event Information**

Does the agency have a ticket policy? Yes  No  Face Value of Each Ticket/Pass \$ 89.50

Event Description Nickelback Concert Date(s) 06 / 18 / 12  
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes  No  If no: City of San Jose  
Name of Source

Was ticket distribution made at the behest of agency official? No  Yes  If yes: Councilmember Nancy Pyle  
Official's Name (Last, First)

**3. Recipients**

• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
Parks, Recreation and Neighborhood Services Staff	16	Staff appreciation for Parks Maintenance and Almaden Community Center staff.
B. Name of Individual (Last, First)	Number of Ticket(s)/Pass(es)	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below:
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy

**4. Verification**

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Nancy Pyle Nancy Pyle District 10 Councilmember 7/2/12  
Signature of Agency Head or Designee Print Name Title (Month, Day, Year)