

Agency Report of:

Ceremonial Role Events and Ticket/Pass Distributions

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1. Agency Name City of San Jose		Date Stamp 2012 OCT 12 AM 9:51	California Form 802 For Official Use Only
Division, Department, or Region (If Applicable) Council District 7			
Designated Agency Contact (Name, Title) Noelle Vergara		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
Area Code/Phone Number (408) 535-4961	E-mail noelle.vergara@sanjoseca.gov	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 \$ _____ 358

Event Description Madonna Date(s) 10 / 7 / 12
Provide Title/Explanation

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

Was ticket distribution made at the behest of agency official? No Yes If yes: _____
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
B. Name of Individual (Last, First)	Number of Ticket(s)/Pass(es)	Identify one of the following:
Vergara, Noelle	2	Ceremonial Role <input checked="" type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
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
Operation Prom Dress volunteers	14	Recognition for volunteer hours for Operation Prom Dress 2012

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.

Madison Nguyen Vice Mayor 10/11/12
Signature of Agency Head or Designee *Print Name* *Title* *(Month, Day, Year)*