

Agency Report of:
 Ceremonial Role Events and
 Ticket/Admission Distributions

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California Form 802
 For Official Use Only

1. Agency Name City of San Jose

Division, Department, or Region (if applicable) Council District 8

Street Address 200 E. Santa Clara St. 15th

Designated Agency Contact (Name, Title) Mary Anne Groen Chief of Staff

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Amendment (Must provide explanation in Part 3.)

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

2012 FEB 10 A 10:09

2. Function, Event, or Ceremonial Role Information

Title SAP Tennis Open Face Value of Each Admission \$ \$26.00 = 107.00

Description _____ Date(s) 2, 16, 17 & 2, 17, 12

Ticket(s)/Admission(s) provided by agency? Yes No If no: San Jose Arena Authority
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes No If yes: _____
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

| Name (Last, First) or Organization (Name, Address, Description) | Number of Admission(s)/ Ticket(s) | Agency Official | Income |
|---|-----------------------------------|--|---------------------------------|
| Villages Tennis Club | 14 | Yes <input type="checkbox"/> | Income <input type="checkbox"/> |
| | | No <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Villages Tennis Club | 16 | Yes <input type="checkbox"/> | Income <input type="checkbox"/> |
| | | No <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Councilmember Herkara 2 | 2 | Yes <input type="checkbox"/> | Income <input type="checkbox"/> |
| | | No <input checked="" type="checkbox"/> | <input type="checkbox"/> |

• Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description.
 • If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.

3. Verification

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

Mary Anne Groen Mary Anne Groen Chief of Staff 02/9/12
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.)