

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

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1. Agency Name <u>City of San Jose</u>		Date Stamp FEB 29 A 9:03	<b>California Form 802</b> For Official Use Only
Division, Department, or Region (if applicable) <u>Council District 9</u>			
Street Address <u>200 E Santa Clara</u>			
Designated Agency Contact (Name, Title) <u>Donald Rocha, Council member</u>		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: _____ <small>(month, day, year)</small>	
Area Code/Phone Number <u>408 535 4909</u>	E-mail <u>Donald.Rocha@sanjoseca.gov</u>		

2. Function, Event, or Ceremonial Role Information

Title Disney on ICE Face Value of Each Admission \$ 36.00  
 Description ICE SKATING Date(s) 2/26/12

Ticket(s)/Admission(s) provided by agency? Yes  No  If no: \_\_\_\_\_  
Name of Source

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

Yes  No  If yes: Rocha, Donald, Council member  
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	<ul style="list-style-type: none"> <li>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.</li> <li>If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.</li> </ul>	Income
<u>Bagby Elementary School</u>	<u>8</u>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	<u>Volunteer work</u>	<input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>		<input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>		<input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>		<input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>		<input type="checkbox"/>

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.

Donald Rocha Donald Rocha Council member 2/27/12  
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.)