Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions RECEIVEA Public Document 1. Agency Name Date Stamp California City of San Jose 2018 MAY -3 PM 1:55 or Official Use Only Division, Department, or Region (if applicable) Council District 1 Designated Agency Contact (Name, Title) Chappie Jones, Councilmember Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: 5/3/18 (408) 535-4901 district1@sanjoseca.gov (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ \$55.50 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: Sharks vs. Knights Date(s) ______/__ Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? If no: _ Yes ⊠ No □ Name of Source If yes: Jones, Chappie Was ticket distribution made at the behest Yes ☒ No ☐ Official's Name (Last, First) of agency official? 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. Number Name of Agency, Department or Unit of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy Passes Number Name of Individual B. Identify one of the following: of Ticket(s)/ (Last, First) Passes Ceremonial Role Other X Sam Robledo If checking "Ceremonial Role" or "Other" describe below: 4 Constituent who has provided invaluable service in volunteer time to his community Ceremonial Role Other 🔲 Income ___ If checking "Ceremonial Role" or "Other" describe helow Number Name of Outside Organization C. of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy (include address and description) **Passes** 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. Chappie Jones Councilmember, District 1 5/3/18 Signature of Agency Head or Designee Print Name (month, day, year)

Comment: _

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Signature of Agency Head or Designee Print Name Title (Month, Day, Year)

Comment: