

**Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions**

**A Public Document**

<b>1. Agency Name</b>		Date Stamp <b>RECEIVED</b> San Jose City Clerk <i>e-mail</i> 2018 DEC 14 AM 8:06	<b>California Form 802</b> <small>For Official Use Only</small>
City of San Jose			
Division, Department, or Region (if applicable) Council District 4			
Designated Agency Contact (Name, Title) Thulien Dang, Council Assistant			
Area Code/Phone Number 408-535-4904	E-mail District4@sanjoseca.gov	<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.)  Date of Original Filing: _____ <small>(month, day, year)</small>	

**2. Function or Event Information**

Does the agency have a ticket policy?    Yes  No     Face Value of Each Ticket/Pass \$ 225 box and 82 seat

Event Description: Sharks Vs. Oilers    Date(s) 11 / 20 / 18  
Provide Title/ Explanation

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

Was ticket distribution made at the behest of agency official?    Yes  No     If yes: Lan Diep  
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)/ Passes	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
Dumpster Day Volunteers from 9/15/18	24	Community Involvement/Support Recognition.

**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.*

<u>Lan Diep</u> <small>Signature of Agency Head or Designee</small>	Lan Diep <small>Print Name</small>	Councilmember <small>Title</small>	11/29/2018 <small>(month, day, year)</small>
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Comment: \_\_\_\_\_

**Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions** RECEIVED **A Public Document**

<b>1. Agency Name</b> City of San Jose		San Jose City Clerk Date Stamp OTCM 2018 SEP 18 PM 2:47	California Form <b>802</b> For Official Use Only
Division, Department, or Region (if applicable) Council District 4			
Designated Agency Contact (Name, Title) Thulien Dang, Council Assistant		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.)	
Area Code/Phone Number 408-535-4904	E-mail District4@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 \$ 99.50

Event Description: Summer Jams Date(s) 9 / 9 / 18  
Provide Title/ Explanation

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

Was ticket distribution made at the behest of agency official? Yes  No  If yes: Shelly Wang, Ticket Programs Coordinator  
Official's Name (Last, First)

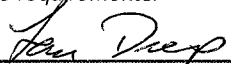
**3. Recipients**

• 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)/ Passes	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following: Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
Summer Event Festival Volunteers	14	Community Involvement/Support Recognition

**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.


Lan Diep
Councilmember
9/18/18  
Signature of Agency Head or Designee
Print Name
Title
(month, day, year)

Comment: \_\_\_\_\_

**Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions**

RECEIVED A Public Document

<b>1. Agency Name</b> City of San Jose <hr/> <b>Division, Department, or Region</b> (if applicable) Council District 4 <hr/> <b>Designated Agency Contact</b> (Name, Title) Thulien Dang, Council Assistant <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:50%; border: none;"><b>Area Code/Phone Number</b></td> <td style="width:50%; border: none;"><b>E-mail</b></td> </tr> <tr> <td style="border: none;">408-535-4904</td> <td style="border: none;">District4@sanjoseca.gov</td> </tr> </table>	<b>Area Code/Phone Number</b>	<b>E-mail</b>	408-535-4904	District4@sanjoseca.gov	<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">                     San Jose City Clerk  <i>OTC</i>                      2018 JUN 20 PM 1:46                 </div> <div style="border: 1px solid black; padding: 5px;"> <b>California Form 802</b>                      For Official Use Only  <input type="checkbox"/> <b>Amendment</b> (Must Provide Explanation in Part 3.)                      Date of Original Filing: _____                      (month, day, year)                 </div>
<b>Area Code/Phone Number</b>	<b>E-mail</b>				
408-535-4904	District4@sanjoseca.gov				

**2. Function or Event Information**

Does the agency have a ticket policy?    Yes  No     Face Value of Each Ticket/Pass \$ 27.00

Event Description: Neighborhood Nights SJ Earthquakes    Date(s) 6 / 13 / 18  
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?    Yes  No     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)/ Passes	Describe the public purpose made pursuant to the agency's policy
Council District 4	2	Host participants- Ceremonial Role
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role <input checked="" type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	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.

<u><i>Lan Diep</i></u> Signature of Agency Head or Designee	Lan Diep Print Name	Councilmember Title	6/19/18 (month, day, year)
--	------------------------	------------------------	-------------------------------

Comment: \_\_\_\_\_

**Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions**

RECEIVED A Public Document

**1. Agency Name**

City of San Jose

Division, Department, or Region (if applicable)

Council District 4

Designated Agency Contact (Name, Title)

Thulien Dang, Council Assistant

Area Code/Phone Number

408-535-4904

E-mail

District4@sanjoseca.gov

San Jose Date Stamp  
OTC  
2018 APR 23 PM 4:32

California Form 802

For Official Use Only

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 \$ 254.00

Event Description: Justin Timberlake Concert Date(s) 4 / 25 / 18  
Provide Title/ Explanation

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

Was ticket distribution made at the behest of agency official? Yes  No  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)/ Passes	Describe the public purpose made pursuant to the agency's policy
Council District 4	3	Host participants
<b>B. Name of Individual (Last, First)</b>		
	Number of Ticket(s)/ Passes	Identify one of the following: Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
<b>C. Name of Outside Organization (include address and description)</b>		
Dumpster Day/Litter Day Pick Up Volunteers	13	Community Involvement/support recognition

**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.

Lan Diep Signature of Agency Head or Designee      Lan Diep Print Name      Councilmember Title      4/23/18 (month, day, year)

Comment: \_\_\_\_\_

**Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions**

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San Jose City Clerk **A Public Document**

<b>1. Agency Name</b>		Date Stamp 2014 SEP 22 PM 3 AT JTC	California Form <b>802</b> For Official Use Only
City of San Jose			
Division, Department, or Region (If Applicable)		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: _____ (Month, Day, Year)	
Council District 4			
Designated Agency Contact (Name, Title)			
Area Code/Phone Number	E-mail		
408 535.4904	district4@sanjoseca.gov		

**2. Function or Event Information**

Does the agency have a ticket policy? Yes  No  Face Value of Each Ticket/Pass \$ 262.00

Event Description SLAM, The Tour Date(s) 08 / 23 / 14  
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes  No  If no: San Jose Arena Authority  
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:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
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
Federation of Indo Americans of Northern California	8	Recognition event for their efforts to unite local South Asians culturally & cultivate their moral values through various events

**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.

Kansen Chu Kansen Chu Councilmember 09/19/14  
Signature of Agency Head or Designee Print Name Title (Month, Day, Year)

Agency Report of:  
**Ceremonial Role Events and Ticket/Pass Distributions**

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 San Jose City Clerk

A Public Document

1. Agency Name		Date Stamp	California Form <b>802</b> For Official Use Only
City of San Jose		2014 SEP 22 PM 3:02 OTC	
Division, Department, or Region (If Applicable)			
Council District 4			
Designated Agency Contact (Name, Title)		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: _____ (Month, Day, Year)	
Area Code/Phone Number	E-mail		
408 535.4904	district4@sanjoseca.gov		

2. Function or Event Information

Does the agency have a ticket policy? Yes  No  Face Value of Each Ticket/Pass \$ 52.00

Event Description Ringling Bros & Barnum?Bailey Circus Date(s) 08 / 23 / 14  
Provide Title/Explanation

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

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

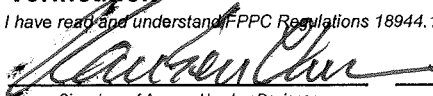
3. Recipients

• 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
San Jose Police Dept. School Safety Unit	24	Recognition event for efforts of City's School Safety Unity staff over the past school year
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.

 Kansen Chu Councilmember 09/19/14  
Signature of Agency Head or Designee Print Name Title (Month, Day, Year)

**Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions**

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San Jose City Clerk

A Public Document

<b>1. Agency Name</b> City of San Jose		Date Stamp 2014 FEB 21 AM 8:57 <i>CHU</i>	California Form <b>802</b> For Official Use Only
Division, Department, or Region (If Applicable) Council District 4			
Designated Agency Contact (Name, Title)			
Area Code/Phone Number 408/535-4904	E-mail district4@sanjoseca.gov	<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 \$ \_\_\_\_\_ 52.50

Event Description Imagine Dragons Date(s) 02 / 13 / 14  
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes  No  If no: San Jose Arena Authority  
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:
		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
Independence High School student volunteers	16	Recognition event for District 4's Spooky Halloween and Haunted House volunteers.

**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.

*Kansen Chu* Kansen Chu Councilmember 02/20/14  
Signature of Agency Head or Designee Print Name Title (Month, Day, Year)

**Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions**

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FPPC  
A Public Document

<b>1. Agency Name</b> City of San Jose		Date Stamp 2013 DEC 13 AM 9:30	<b>California Form 802</b> For Official Use Only
Division, Department, or Region (If Applicable) Council District 4			
Designated Agency Contact (Name, Title)		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
Area Code/Phone Number 408/535-4904	E-mail district4@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 \$ \_\_\_\_\_ 192

Event Description Sharks v. Ducks Date(s) 11 / 30 / 13  
Provide Title/Explanation

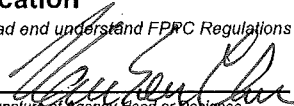
Ticket(s)/Pass(es) provided by agency? Yes  No  If no: San Jose Arena Authority  
Name of Source

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:
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		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
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
Counsel General of Taiwan and EVA Airlines	24	Recognition event.

**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.

 Kansen Chu Councilmember 12/12/13  
Signature of Agency Head or Designee Print Name Title (Month, Day, Year)

Comment: \_\_\_\_\_



**Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions**

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San Jose City Clerk

**A Public Document**

<b>1. Agency Name</b> City of San Jose		Date Stamp 2012 DEC 13 7:19:31	<b>California Form 802</b> For Official Use Only
Division, Department, or Region (If Applicable) Council District 4			
Designated Agency Contact (Name, Title)			
Area Code/Phone Number 408/535-4904	E-mail district4@sanjoseca.gov	<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 \$ \_\_\_\_\_ 39.50

Event Description Paramore Date(s) 10 / 18 / 13  
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes  No  If no: San Jose Arena Authority  
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:
		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
Independence High School student volunteers	16	Recognition event for District 4's Public Safety Resource Fair and Movie Night volunteers.

**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.

Kansen Chu                      Kansen Chu                      Councilmember                      12/12/13  
Signature of Agency Head or Designee                      Print Name                      Title                      (Month, Day, Year)

**Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions**

A Public Document

1. Agency Name		Date Stamp	California Form <b>802</b> For Official Use Only
City of San Jose		2013 MAY -2 AM 10:53	
Division, Department, or Region (If Applicable)			
Council District 4			
Designated Agency Contact (Name, Title)			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
408-635-4904	district4@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 \$ \_\_\_\_\_ 238

Event Description Vicente Fernandez Concert Date(s) 04 / 14 / 13  
*Provide Title/Explanation*

Ticket(s)/Pass(es) provided by agency? Yes  No  If no: San Jose Arena Authority  
*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:
		Ceremonial Role <input 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
San Jose Vet Center	8	Recognition event.

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.

Kansen Chu                      Kansen Chu                      City Councilmember                      4/26/13  
*Signature of Agency Head or Designee*                      *Print Name*                      *Title*                      *(Month, Day, Year)*

**Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions**

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San Jose City Clerk San Jose  
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1. Agency Name City of San Jose		Date Stamp 2013 FEB 22 PM 3:30 California Form 802 For Official Use Only
Division, Department, or Region (If Applicable) Council District 4		
Designated Agency Contact (Name, Title) Area Code/Phone Number 408-535-4904		
E-mail district4@sanjoseca.gov		<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 \$ \_\_\_\_\_ 80

Event Description Disney on Ice: Dare to Dream Date(s) 2 / 23 / 13  
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes  No  If no: San Jose Arena Authority  
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:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
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.
District 4 Community Volunteers	16	Recognition for community volunteers - 12/8/12 Breakfast with Santa event.

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.

Kansen Chu      Kansen Chu      Councilmember      2/19/13  
Signature of Agency Head or Designee      Print Name      Title      (Month, Day, Year)

**Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions**

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San Jose City Clerk

A Public Document

1. Agency Name		Date Stamp	California Form <b>802</b> For Official Use Only
City of San Jose		2013 FEB 22 PM 3:31	
Division, Department, or Region (If Applicable)			
Council District 4			
Designated Agency Contact (Name, Title)			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
408-535-4904	district4@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 \$ \_\_\_\_\_ 100

Event Description SAP Open Date(s) 2/ / 16 / 13  
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes  No  If no: San Jose Arena Authority  
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:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
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
Piedmont Hills High School	16	Recognition event.

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.

 Kansen Chu Councilmember 2/19/13  
Signature of Agency Head or Designee Print Name Title (Month, Day, Year)

Comment: \_\_\_\_\_

**Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions**

RECEIVED  
San Jose City Clerk

**A Public Document**

<b>1. Agency Name</b>		Date Stamp	<b>California Form 802</b> For Official Use Only
City of San Jose		2013 FEB 22 PM 3: 31	
Division, Department, or Region (If Applicable)			
Council District 4			
Designated Agency Contact (Name, Title)			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
408-535-4904	dlstrct4@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 \$ \_\_\_\_\_ 64

Event Description SAP Open Date(s) 2 / 13 / 13 2 / 14 / 13  
*Provide Title/Explanation*

Ticket(s)/Pass(es) provided by agency? Yes  No  If no: San Jose Arena Authority  
*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:
		Ceremonial Role <input 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
Berryessa Senior Advisory Council	48	Recognition event.

**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.

 Kansen Chu Councilmember 2/19/13  
*Signature of Agency Head or Designee* *Print Name* *Title* *(Month, Day, Year)*

**Agency Report of:**  
**Ceremonial Role Events and Ticket/Pass Distributions**

RECEIVED  
 Jose City Clerk

A Public Document

<b>1. Agency Name</b>		Date Stamp	<b>California Form 802</b> For Official Use Only
City of San Jose		2013 FEB 22 PM 3:31	
Division, Department, or Region (If Applicable)			
Council District 4			
Designated Agency Contact (Name, Title)			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
408-535-4904	district4@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 \$ 80/\$130/192

Event Description Sharks v. Predators Date(s) 2 / 8 / 13  
Provide Title/Explanation

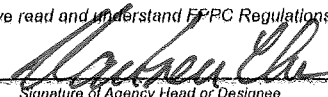
Ticket(s)/Pass(es) provided by agency? Yes  No  If no: San Jose Arena Authority  
Name of Source

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:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
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
San Jose Junior Sharks 1500 S. 10th Street, SJ, CA 95112	16	Recognition event.

**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.

 Kansen Chu Councilmember 2/19/13  
Signature of Agency Head or Designee Print Name Title (Month, Day, Year)

**Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions**

RECEIVED  
Jose City Clerk

A Public Document

**1. Agency Name**

City of San Jose  
Division, Department, or Region (If Applicable)  
Council District 4  
Designated Agency Contact (Name, Title)

Date Stamp  
2013 FEB 22 PM 3:31

California Form **802**  
For Official Use Only

Area Code/Phone Number  
408-535-4904

E-mail  
district4@sanjoseca.gov

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 \$ \_\_\_\_\_ 49

Event Description Valentine's Super Love Jam Date(s) 2 / 8 / 13  
*Provide Title/Explanation*

Ticket(s)/Pass(es) provided by agency? Yes  No  If no: San Jose Arena Authority  
*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:
		Ceremonial Role <input 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
Berryessa Community Center	48	Recognition event.

**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.

 Kansen Chu Councilmember 2/19/13  
*Signature of Agency Head or Designee* *Print Name* *Title* *(Month, Day, Year)*

Comment: \_\_\_\_\_