

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

A Public Document

1. Agency Name City of San Jose		San Jose City Clerk	Date Stamp	California Form 802 For Official Use Only 2020 MAR 11 P 2 37
Division, Department, or Region (if applicable) Housing Department		2020 MAR 11	P 2:38	
Designated Agency Contact (Name, Title) Maria Malloy, Analyst				<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _____ (month, day, year)
Area Code/Phone Number 408-975-4413	E-mail maria.malloy@sanjoseca.gov	OTC		

2. Function or Event Information

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

Event Description: Sharks Versus Minnesota Wild Date(s) 03 / 05 / 20
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
City of San Jose Housing Department	16	16 suite tickets to recognize staff for the 2019 Green Commute Challenge
City of San Jose Housing Department	8	8 lower level tickets -- same purpose as listed above
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

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.


 _____ Jacky Morales-Ferrand _____ Director of Housing _____ 03/05/20
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: _____

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

Agency Name

City of San Jose

3. Recipients

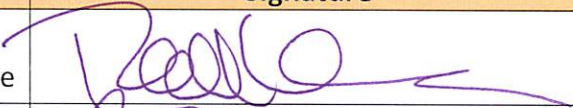


• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
See attached		
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"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
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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

San Jose Sharks VS Minnesota Wild
 SAP Center / City Box & Lower Level / Recognition for 2019 Green Commute Challenge
 March 5, 2020 @ 7:30PM

Name	Organization	# of Tickets	Public Purpose	Signature
Kristine Lane	City of San José	2 - Suite	2019 Green Commute Challenge	Kristine Lane
CLAY POON	City of San José	2 - Suite	2019 Green Commute Challenge	Clay Poon
Lisa Rice	City of San José	2 - Suite	2019 Green Commute Challenge	Lisa Rice
Guido Grilli	City of San José	2 - Suite	2019 Green Commute Challenge	[Signature]
Gabriel Borden	City of San José	2 - Suite	2019 Green Commute Challenge	[Signature]
Delilah Chavez	City of San José	2 - Suite	2019 Green Commute Challenge	Delilah Chavez
Tascha Mattes	City of San José	2 - Suite	2019 Green Commute Challenge	Tascha Mattes
April Ensign	City of San José	2 - Suite	2019 Green Commute Challenge	April Ensign
Lorenz Diez	City of San José	2 - Lower Level	2019 Green Commute Challenge	[Signature]
Selena Copeland	City of San José	2 - Lower Level	2019 Green Commute Challenge	Selena Copeland
Rob I Lopez	City of San José	2 - Lower Level	2019 Green Commute Challenge	[Signature]
Stefanie Enders	City of San José	2 - Lower Level	2019 Green Commute Challenge	[Signature]

San Jose Sharks VS Minnesota Wild
SAP Center / City Box & Lower Level / Recognition for 2019 Green Commute Challenge
March 5, 2020 @ 7:30PM

Name	Organization	# of Tickets	Public Purpose	Signature
Rachel VanderVeen	City of San José	2 - Suite	2019 Green Commute Challenge	
Viviane Nguyen	City of San José	2 - Suite	2019 Green Commute Challenge	
Korey Richardson	City of SJ	2 - Suite	" "	

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

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1. Agency Name

City of San José

Division, Department, or Region (if applicable)

Housing Department

Designated Agency Contact (Name, Title)

Maria Malloy, Analyst

Area Code/Phone Number

408-975-4413

E-mail

maria.malloy@sanjoseca.gov

RECEIVED San Jose City Clerk OTCM 2019 MAY -6 AM 10:45	Date Stamp California Form 802 For Official Use Only
<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 \$ unknown

Event Description: Ariana Grande Concert Date(s) 05 / 02 / 19
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
City of San José Housing Department	16	16 suite tickets to recognize staffs efforts in organizing and participating in the 2018 Green Commute Challenge.
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

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.


Jacky Morales-Ferrand
Director
4-26-19
Signature of Agency Head or Designee
Print Name
Title
(month, day, year)

Comment: _____

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

Agency Name

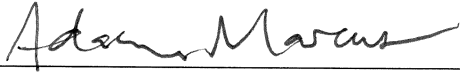
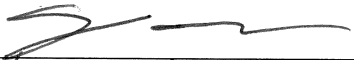
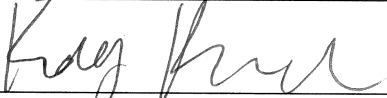
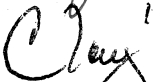
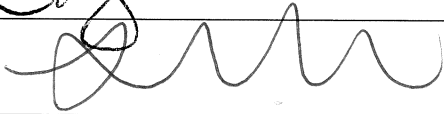







City of San José

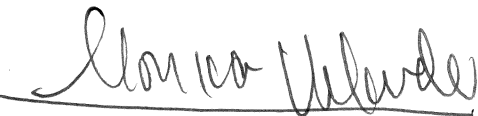
3. Recipients

• 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
See Attached		
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"/> <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>
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		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)/ Passes	Describe the public purpose made pursuant to the agency's policy

Ariana Grande Concert
 SAP Center / City Box / Recognition for 2018 Green Commute Challenge
 May 2, 2019

Name	Organization	# of Tickets	Public Purpose	Signature
Adam Marcus	City of San José	2	2018 Green Commute Challenge	
Amy Chen	City of San José	2	2018 Green Commute Challenge	
Korey Richardson	City of San José	2	2018 Green Commute Challenge	
Clayton Poon	City of San José	2	2018 Green Commute Challenge	
Tina Vo	City of San José	2	2018 Green Commute Challenge	
				
Jacklyn Joanino	City of San José	2	2018 Green Commute Challenge	
Robert Lopez	City of San José	2	2018 Green Commute Challenge	

Monica Velarde City of SJ 2 2018 Green Commute Challenge 

**Agency Report of:
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1. Agency Name City of San José		San Jose Date Stamp Clerk 2016 OCT 18 PM 2:11 AT JTC	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) Housing Department			
Designated Agency Contact (Name, Title) Maria Haase, Analyst		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.)	
Area Code/Phone Number 408-975-4413	E-mail maria.haase@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 \$ 85.00

Event Description: Pentatonix Date(s) 10 / 17 / 16
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
City of San José Housing Department	16	16 tickets to recognize staff for their contributions in the Department's Recognition Team.
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




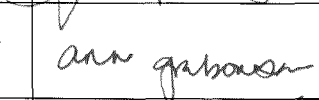


4. Verification

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.


Jacky Morales-Ferrand
Director of Housing
10/17/16
Signature of Agency Head or Designee
Print Name
Title
(month, day, year)

Comment: _____

Pentatonix
 SAP Center / City Box Suite / Recognition
 October 17, 2016

Name	Organization	Face Value per Ticket	# of Tickets	Public Purpose	Signature
Janie Le	CSJ Housing Department	\$85.00	2	Housing Recognition Team - Recognition	
Selena Copeland	CSJ Housing Department	\$85.00	2	Housing Recognition Team - Recognition	
Sara Fulton	CSJ Housing Department	\$85.00	2	Housing Recognition Team - Recognition	
Jovette Armenta	CSJ Housing Department	\$85.00	2	Housing Recognition Team - Recognition	
Ann Grabowski	CSJ Housing Department	\$85.00	2	Housing Recognition Team - Recognition	
Maria Haase	CSJ Housing Department	\$85.00	2	Housing Recognition Team - Recognition	
Rachel Vanderkeem	CSJ Housing Department	\$85.00	2	Housing Recognition Team - Recognition	
	CSJ Housing Department	\$85.00	2	Housing Recognition Team - Recognition	

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

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1. Agency Name City of San Jose		Date Stamp OTC R. 6/2 2018 MAR 23 PM 2:15	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) Housing Department			<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _____ (month, day, year)
Designated Agency Contact (Name, Title) Maria Malloy, Analyst			
Area Code/Phone Number 408-975-4413	E-mail maria.malloy@sanjoseca.gov		

2. Function or Event Information

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

Event Description: Sharks Vs Vegas Golden Nights Date(s) 03 / 22 / 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
City of San Jose Housing Department	16	16 suite tickets to recognize staff efforts to obtain a grant through Affordable Housing Sustainable Communities.
City of San Jose Housing Department	8	8 Lower Level tickets - same purpose as listed above
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

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.

Signature of Agency Head or Designee	Jacky Morales-Ferrand Print Name	Director of Housing Title	3/22/18 (month, day, year)
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Comment: _____

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

Agency Name







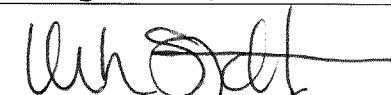
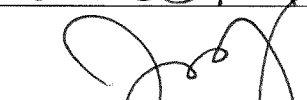
City of San Jose

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
See Attached		
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"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
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		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)/ Passes	Describe the public purpose made pursuant to the agency's policy

Sharks Vs Vegas Golden Knights
 SAP Center / City Box / Recognition for AHSC Team
 March 22, 2018

Name	Organization	# of Tickets	Public Purpose	Signature
<div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div> Kevin O'Connor	City of San José	2	Housing Related Efforts in San José	
James Stagi	City of San José	2	Housing Related Efforts in San José	
Samantha Luke	Charities Housing	2	Housing Related Efforts in San José	
Kathy Robinson	Charities Housing	2	Housing Related Efforts in San José	
Regina Williams	First Community Housing	2	Housing Related Efforts in San José	
Zahir Gulzadah	City of San José	2	Housing Related Efforts in San José	
Mark Gerhardt	City of San José	2	Housing Related Efforts in San José	
Jaki Joanino	City of San José	2	Housing Related Efforts in San José	

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Ceremonial Role Events and Ticket/Pass Distributions

A Public Document

1. Agency Name

City of San José

Date Stamp
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San Jose City Clerk
2017 NOV 30 AM 10:19

California Form 802

For Official Use Only

Division, Department, or Region (if applicable)

Housing Department

Designated Agency Contact (Name, Title)

Maria Malloy, Analyst

Area Code/Phone Number

408-975-4413

E-mail

maria.malloy@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 [X] No [] Face Value of Each Ticket/Pass \$ unknown

Event Description: Jingle Ball Date(s) 11 / 30 / 17

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

Was ticket distribution made at the behest of agency official? Yes [] No [X] 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.

Table with 3 columns: Name of Agency/Individual/Organization, Number of Ticket(s)/Passes, and Describe the public purpose/Identify one of the following.

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.

Signature of Agency Head or Designee: Jacky Morales-Ferrand, Director of Housing, 11/30/17

Comment:

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

Agency Name


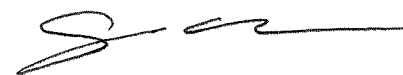
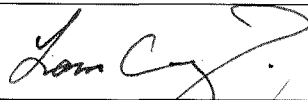



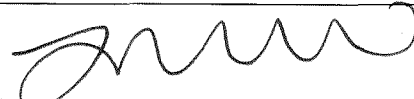
City of San José

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
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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

Jingle Ball
 SAP Center / City Box / Recognition for AHSC Team
 November 30, 2017

Name	Organization	# of Tickets	Public Purpose	Signature
Adam Marcus	City of San José	2	Housing Related Efforts in San José	
Amy Chen	City of San José	2	Housing Related Efforts in San José	
Grecia Ayon	Enterprise Community	2	Housing Related Efforts in San José	Maria Malloy to sign on Grecia's behalf. Mailed tickets on 11/16/17.
Lam Cruz	City of San José	2	Housing Related Efforts in San José	
Dave Bopf	City of San José	2	Housing Related Efforts in San José	
Viviane ^{Nguyen}	City of San Jose	2	Storm Resource Fair	
Theresa Ramos	" "	2	" "	
Tina Vo	" "	2	" "	

Sharks Vs Vegas Golden Knights
SAP Center / Lower Level Tickets / Recognition for AHSC Team
March 22, 2018

Name	Organization	# of Tickets	Public Purpose	Signature
 Maria Malloy	City of San José	2	Housing Related Efforts in San José	 Maria Malloy
Aurelia Bailey	City of San José	2	Housing Related Efforts in San José	A Bailey
Theresa Ramos	City of San José	2	Housing Related Efforts in San José	Theresa Ramos
Clayton Poon	City of San Jose	2 ✓	Housing Related Efforts in San José	Clayton Poon

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1. Agency Name		Date Stamp 2016 SEP 22 AM 9:30 EP JTC	California Form 802 For Official Use Only
City of San José			
Division, Department, or Region (if applicable) Housing Department			
Designated Agency Contact (Name, Title) Maria Haase, Analyst			
Area Code/Phone Number 408-975-4413	E-mail maria.haase@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 \$ 179.50

Event Description: Drake Concert Date(s) 09 / 25 / 16
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
City of San José Housing Department	16	16 tickets to recognize staff for their contributions in the Department's Recognition Team.
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"/> <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)/ Passes	Describe the public purpose made pursuant to the agency's policy








4. Verification

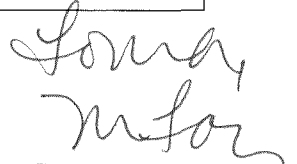
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

	Jacky Morales-Ferrand	Director of Housing	9/13/16
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

Comment: _____

Drake Concert
 SAP Center / City Box Suite / Recognition
 September 25, 2016

Name	Organization	Face Value per Ticket	# of Tickets	Public Purpose	Signature
Lorena Negrete	CSJ Housing Department	\$179.50	2	Housing Recognition Team - Recognition	
Tascha Mattos	CSJ Housing Department	\$179.50	2	Housing Recognition Team - Recognition	
Kelly Hemphill	CSJ Housing Department	\$179.50	2	Housing Recognition Team - Recognition	
Aurelia Bailey	CSJ Housing Department	\$179.50	2	Housing Recognition Team - Recognition	
Isaac Orona	CSJ Housing Department	\$179.50	2	Housing Recognition Team - Recognition	
Delilah Chavez	CSJ Housing Department	\$179.50	2	Housing Recognition Team - Recognition	
Korey Richardson	CSJ Housing Department	\$179.50	2	Housing Recognition Team - Recognition	
Robert I.	CSJ Housing Department	\$179.50	2	Housing Recognition Team - Recognition	_____

Lorena Lopez CSJ Housing Dept. \$179.50 2 Housing Rec Team - Recognition 

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

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1. Agency Name		Date Stamp 2015 MAR 12 PM 1:00 <i>(Handwritten initials)</i>	California Form 802 For Official Use Only
City of San Jose			
Division, Department, or Region (If Applicable)			
Housing Department			
Designated Agency Contact (Name, Title)			
Maria Haase, Assistant to the Director / Analyst			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
408-975-4413	maria.haase@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 \$ _____ 153.00

Event Description Sharks vs Canucks Date(s) 3 / 7 / 15 _____
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)

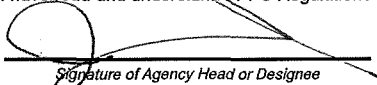
3. Recipients

• 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
City of San Jose Housing Department	8	8 tickets to recognize staff for their efforts in passing a Housing Impact Fee.
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

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.

 <i>Signature of Agency Head or Designee</i>	Jacky Morales-Ferrand <i>Print Name</i>	Interim Director of Housing <i>Title</i>	3/2/15 <i>(Month, Day, Year)</i>
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**Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions
Continuation Sheet**

Agency Name

City of San Jose

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
See Attached		
B. Name of Individual <small>(Last, First)</small>	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>
		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 <small>(include address and description)</small>	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy

Sharks vs. Canucks
 SAP Center / Club Seats / Recognition
 March 7, 2015

Name	Organization	Face Value per Ticket	# of Tickets	Public Purpose	Signature
██████████	██████████	██████████	██████████	██████████	██████████
Kristen Clements	CSJ Housing Department	\$153.00	2	Housing Impact Fee Recognition	<i>[Signature]</i>
Maria Haase	CSJ Housing Department	\$153.00	2	Housing Impact Fee Recognition	<i>[Signature]</i>
Lisa Rice	CSJ Attorneys Office	\$153.00	2	Housing Impact Fee Recognition	<i>[Signature]</i>

Karla Cacceres CSJ Housing Dept. \$153.00 2 Employee of the Year 2014 Karla Cacceres

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

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1. Agency Name City of San Jose		Date Stamp 2015 MAR 12 PM 1:30 <i>(B)OTC</i>	California Form 802 For Official Use Only
Division, Department, or Region (If Applicable) Housing Department		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
Designated Agency Contact (Name, Title) Maria Haase, Assistant to the Director / Analyst			
Area Code/Phone Number 408-975-4413	E-mail maria.haase@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 \$ _____ 98

Event Description Bob Seger Concert Date(s) 3 / 5 / 15 _____
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)

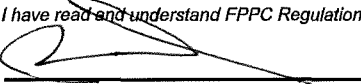
3. Recipients

• 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
City of San Jose Housing Department	16	16 tickets to recognize staff for their efforts in passing a Housing Impact Fee and co-chairs of the Departments Recognition Team.
B. Name of Individual (Last, First)		
		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)		
		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.

	Jacky Morales-Ferrand	Interim Director of Housing	3/2/15
Signature of Agency Head or Designee	Print Name	Title	(Month, Day, Year)

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

Agency Name

City of San Jose

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
See Attached		
B. Name of Individual <small>(Last, First)</small>	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>
		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 <small>(include address and description)</small>	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy

Bob Seger Concert
 SAP Center / City Box Suite / Recognition
 March 5, 2015

Name	Organization	Face Value per Ticket	# of Tickets	Public Purpose	Signature
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Jacky Morales-Ferrand	CSJ Housing Department	\$98.00	2	Housing Impact Fee Recognition	[Signature]
Leslye Corsiglia	Former CSJ Housing Department Employee	\$98.00	2	Housing Impact Fee Recognition	[Signature]
Ann Grabowski	CSJ Housing Department	\$98.00	2	Housing Impact Fee Recognition	ann grabowski
Wayne Chen	CSJ Housing Department	\$98.00	2	Housing Impact Fee Recognition	Wayne
Dave Bopf	CSJ Housing Department	\$98.00	2	Housing Impact Fee Recognition	[Signature]
Sara Fulton	CSJ Housing Department	\$98.00	2	Support to Dept. Recognition Team	Sara Fulton
Selena Copeland	CSJ Housing Department	\$98.00	2	Support to Dept. Recognition Team	Selena Copeland

Leif Regvall CSJ Housing Dept \$98.00

[Signature]

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

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1. Agency Name		2013 NOV 18 PM 1:03 JMC OTC	California Form 802 For Official Use Only
City of San Jose			
Division, Department, or Region (If Applicable) Housing Department			
Designated Agency Contact (Name, Title) Maria Haase, Assistant Director of Housing / Analyst			
Area Code/Phone Number 408-975-4413	E-mail maria.haase@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 \$ 139.00

Event Description Sharks vs. Tampa Bay Lightning Date(s) 11 / 21 / 13
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)

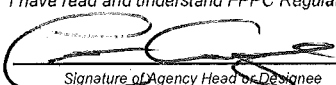
3. Recipients

• 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
City of San Jose Housing Department	8	8 tickets to recognize staff of the Neighborhood Stabilization Program and the Housing Impact Fee Team.
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

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.



Signature of Agency Head or Designee

Print Name

Title

(Month, Day, Year)

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

Agency Name





City of San Jose

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
See attached		
B. Name of Individual <small>(Last, First)</small>	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>
		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 <small>(Include address and description)</small>	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy

Sharks vs. Tampa Bay Lightning
 SAP Center / Club Seats / Recognition
 November 21, 2013

Name	Organization	Face Value per Ticket	# of Tickets	Public Purpose	Signature
Fereshteh Zakeri	City of San Jose	\$139.00	2	Neighborhood Stabilization Program	
Dave Bopf	City of San Jose	\$139.000	2	Neighborhood Stabilization Program	
Patrick Heisinger	City of San Jose	\$139.00	2	Housing Impact Fee Nexus Study	
Maria Haase	City of San Jose	\$139.000	2	Housing Impact Fee Nexus Study	

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

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 San Jose City Clerk

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1. Agency Name City of San Jose		Date Stamp 2013 OCT 23 AM 8:55	California Form 802 For Official Use Only
Division, Department, or Region (If Applicable) Housing Department			
Designated Agency Contact (Name, Title) Maria Haase, Assistant to the Director/Analyst II			
Area Code/Phone Number 408-975-4413	E-mail maria.haase@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 \$ _____ 139 or 192

Event Description NSP II / Recognition Date(s) 10 / 19 / 13 11 / 02 / 13
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: Additional date 11/05/13
Name of Source

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

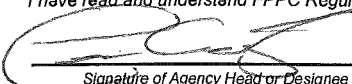
3. Recipients

• 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
City of San Jose, Housing Department	40	24 tix for 10/19/13, 8 tix for 11/2/13, and 8 tix for 11/5/13 to recognize the staff of the Neighborhood Stabilization Program
B. Name of Individual (Last, First)	Number of Ticket(s)/Pass(es)	Identify one of the following:
See Attached		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: See Attached
		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
See Attached		

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.



Signature of Agency Head or Designee

Print Name

Title

(Month, Day, Year)

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

Agency Name *See attached*

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 <i>(Last, First)</i>	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>
		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 <i>(include address and description)</i>	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy

