### Agency Report of:

Ce	remonial Role Even	ts and Ticket/P	ass Distri	butions	Α	Public Document
1.	Agency Name				Date Stamp	California 802
	City of San Jose					
Ī	Division, Department, or Region (if applicable)				For Official Use Only	
	City Manager's Office					
	Designated Agency Contact	(Name, Title)				
	David Sykes, City Manager				Amendment (Must F	Provide Explanation in Part 3.)
,	rea Code/Phone Number E-mail					
	(408) 535-8100	webmaster.manag	er@sanjosec	a.gov	Date of Original Filing:	(month, day, year)
2.	Function or Event Infor	mation				
	Does the agency have a tick	ket policy? Yes [	⊠ No 🗆 F	ace Value of	Each Ticket/Pass \$ $\frac{3}{2}$	0.00
	Event Description: SJ Earthquakes vs. Toronto  Provide Title/ Explanation  Date(s)			<u>/ 29 / 20</u>		
	Ticket(s)/Pass(es) provided	•		f no:		
				_	Name of Source	
	Was ticket distribution made at the behest Yes ☐ No ☒ If yes: of agency official?			f yes:	Official's Name (Last, First)	
3.	Recipients					
	Use Section A to identify the agen	cy's department or unit. •		identify an individ	lual. • Use Section C to iden	tify an outside organization.
	A. Name of Agency, Department or Unit		Number of Ticket(s)/ Passes	Describe th	e public purpose made pu	rsuant to the agency's policy
	B. Name of Indi		Number of Ticket(s)/ Passes		Identify one of the	following:
	See attached list		482	If check	nonial Role   Other  or "Other of the or "Other" de Jose Employee Appre	escribe below:
				1	nonial Role Other Cking "Ceremonial Role" or "Other" de	
	C. Name of Outside Organization (include address and description)		Number of Ticket(s)/ Passes	Describe th	e public purpose made pui	rsuant to the agency's policy
4.	Verification					
	I have read and understand FF	PC Regulations 18944	.1 and 18942.	I have verified	that the distribution set f	orth above, is in accordance
	with the requirements.	·		_		a å k
(fig.	The Carlo	D.SYV	CES		TYMANAYON	
	Signature of Agency Head or Design	FP	rint Name		Title	(rħonth, day, year)

Comment:

# SJ Earthquakes vs. Toronto City of San Jose Employee Appreciation Day 2/29/20

## **Attendees**

LAST NAME	FIRST NAME
Zuniga	Yanira
Van de Pol	Helen
Patel	Arpit
Madriz	Denisse
Kang	Tommy
Cardenas	Daniel
Rios	Yazmin
Sree	Padma
Nguyen	David
Kumari	Jyoti
VanVliet	Shannon
Martinez	Gina
Phan	Johnny
Ushiro	Aaron
Salazar	Mark
Merida	Kayla
Rulloda	Warren
Maqdoor	Tooryalai
Nguyen	Thuy
Lam	Kristy
Biljouw	Jay
Guerra	Jamie
Brakel	Deanna
Xu	Xin
Caceres	Karla
Shalman	Anatoly
Garcia	Paul
Burciaga	Myranda
Van Zee	Joshua
Torres	Leonela
Ogamba	Ifeanyi
Moreno	Alejandro
Chen	Guixiang
Gandrud	Chris
Guerrero	Jose
Nguyen	Andrew
Nguyen	Но
Tran	Vivian

Martinez	Laura
Corona	Pedro
Chheuy	Melissa
Landin	Tania
Flores	Andrew
Menath	Hyma
Petak	Chris
Liu	Felix
Ramirez	Ivan
Santillana	William
Ponce	Mario
Navarro-Donnellan	Enrique
Hernandez	Kimberly
Casteneda	Elizabeth
Masri	Dara
Gonzales	Daniel
Mohammad	Mumtaz
Gonzales	Danny
Whisenhunt	Blake
Cardenas	Jeremy
Го	Lynn
McCaffery	Megan
Medina	Richard
Fanua	Mary
Feliciano	Shirley
Mohammad	M.
Brazil	John
Solano	Kayla
Gomez	Jordan
Scott	Chris
Phillips	Dakota
Гkalcevic	Mike
Hernandez	Crystal
Nguyen	Anh
Elizondo	Lesly
Nguyen	Anh
Bisquera	Jonathan
Salazar	Margaret
Williams	Peter
Solis	Ed
Nguyen	Huong
Bermillo	Carol
Huynh	Khanh
Alfaro	Angel

	Mann	Sukhpreet
	Medina	Martha
	Perez	Daniel
	Nguyen	Vicki
	Yambao	Genevive
	Cheung	Ron
	Bailey	Alison
	Yang	Yanru
	Georgoff	Nicholas
	Szabo	Anna
	Boyce	Andrew
	Lam	Leon
	Tsang	Arlene
	Brandt	Amory
	Soto	Julia
	Shenas	Seena
	Romero	Geraldine
	Silva	Stephanie
,	Gibilisco	Jason
•	Fonseca	Jaime
	Dao	Trinh
	Lemus	Yadirha
	Luong	Andrew
	Nguyen	Vy
	Cortez	Patsy
	Jackson	Jeffrey
	Ly	Katherine
	Mullane	Michelle
	Cruz	Martin
	Bond	Rosalyn
	Merida	Humberto
	Tamari	Zulma
	Honrada	Rey
	Ulrich	Alexandra
	Amparan	Daisy
	Reyes	Diana
	Berryhill	Katherine
	Fong	David
	Zavala	Alma
	Patrick Connolly	Shane
	Sandoval	Jozanne
	Barlow	Randy
	Velasco	Louis
	Bermillo	David

Castaneda	_
Cabianta	Jose
Green	Sebastian
Chan	Jimmy
Saavedra	Eric
Castro	Adriel
Pacolba	Mahina
Avalos	Richard
McBride	Adrian
Hakimizadeh	Leila
Castro	Davina
Swiech	Jake
Avalos	Richie
Thompson	Curtis
VanderVeen	Rachel
Quintero	Steven
Ruano	Jose
Watson	Andrew
Lucero	Rodney
Rivera	Domenic
Nguyen	Sandra
Salazar	Samantha
Robles	john
Tafolla	Andres Tafolla
Munguia	hector munguia
Vasquez	Victor
Venegas	Rigoberto
Le	Trinh
Lopez	Melissa
Belrose	Kirstin
Irwin	Juanita
Gonzalez	Arlene
Kryst	Tessa
Duran	Octavio
Bolger	Dennis
Gaxiola	Alberto
Gomez	Daniel
Baltazar	Liza
Bennett	Peter
Rivera	Orlando
Trejo	Liana
Nguyen	Viviane
Ayala	Karinna
Zee	Joshua

Prior	James	
Castaneda	Jose	
Green	Sebastian	
Chan	Jimmy	
Saavedra	Eric	
Castro	Adriel	
Pacolba	Mahina	
Avalos	Richard	
McBride	Adrian	
Hakimizadeh	Leila	
	Davina	
Castro	Jake	
Swiech		
Avalos	Richie	
Thompson	Curtis	
VanderVeen	Rachel	
Quintero	Steven	
Ruano	Jose	
Watson	Andrew	
Lucero	Rodney	
Rivera	Domenic	
Nguyen	Sandra	
Salazar	Samantha	
Robles	john	
Tafolla	Andres Tafolla	
Munguia	hector munguia	-
Vasquez	Victor	
Venegas	Rigoberto	
Le	Trinh	
Lopez	Melissa	
Belrose	Kirstin	
Irwin	Juanita	
Gonzalez	Arlene	
Kryst	Tessa	
Duran	Octavio	
Bolger	Dennis	
Gaxiola	Alberto	
Gomez	Daniel	
Baltazar	Liza	
Bennett	Peter	
Rivera	Orlando	
Trejo	Liana	
Nguyen	Viviane	
Ayala	Karinna	
Zee	Joshua	

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Torres	Leonela
Martinez	Laura
Graham	Charlotte
Nguyen	Но
Petak	Chris
Naranjo	Anne Marie
Fanua	Mary
Alfaro	Angel
Szabo	Anna
Brandt	Amory
Fonseca	Jaime
Hendon	Emily
Bond	Rosalyn
Sandoval	Jozanne
Green	Sebastian
Saavedra	Eric
McBride	Adrian
Han	James Han
Ruano	Jose Ruano
Mullane	Michelle
Niemeyer	Andres
Gibson	Carolyn
Ball	Bryce
Martinez	Dorothy
Carvalho	Brent
Mora	Jessica
Wurden	Caroline
Leath	Marcell
Mendez	Zak
Zacarias	Jose
Wikramanayake	Rohan
Medina	Luz
Vazquez	Jose
Pentacoff	Lilia
Pentacoff	David
Clark	Michelle
Groen	Mary Anne
Santos	Ryan Santos
Hernandez	Jennifer
Yee	Nicolette
daSilva	Ross
Gonzalez	Jennifer
Boardman	Brandon
Cheung	Ron

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Haake	Pablo
Castellanos	Guadalupe
Romanazzi	Lauren
Gonzalez	Arlene
Suryamega	Carla
Raza	Zaeem
Behar	Kunwarpreet
Imamura	Justin
Rivera	Marcos
Chum	Michael
Diaz	Leslie
Luna	Jennifer
Yciano	Andy
Chou	Su Syin
Munoz	Adam
Williams	Ted
Gibson	Carolyn
Bone	Dale
Alvarez	Alejandro
Tinsley	Billy
Salinas	Christiane
Hitsa	Saba
Handzar	Mirza
Caramella	Anita
Eng	Quintin
Martinez	Dorothy
Niles	Alex
Lira	Enoc
Carrasco	Ruby
Sandosham	Gabriel
Lee	Brian
Hawkins	Kara
Ceja	Patricia
Rivera	Robert
Peralez	Raul
Tafolla	Javier
Madriz	Humberto
Solorio	Steven
Darmousseh	Scarlet
Seguin	Jennifer
Quindiagan	Bon
Lambert	Zuhayl
	Isabel
Montano	David
Torres	David

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Pentacoff	David
Pentacoff	Lilia
Eusterbrock	Matias
Ramirez	Eugenio
Quach	May
Lam	Kim
Fatolahzadeh	Tala
Lomio	Michael
Telahun	Bethelhem
Horton	Jarrett
Manansala	Timothy
Duroyan	Jason
Santos	Ryan
Nguyen	Helen
Reda	Azarias
Santiago	Lynda
Guerrero	Jacqueline
Parrish	Julian
Rios	Lexis
Skjeie	Linden
Hernandez	Jennifer
Dominguez	Eduardo
Yu	Tina
Ngo	David
Doria	Gabriel
Yee	Nicolette
daSilva	Ross
Gonzalez	Jennifer
Birhanemeskel	Yonas
Montez	Melissa
VanVliet	Charles
Nguyen	My
Marquez	Gary
Alba	Leonardo
Leon	Javier
Lane	Maria
Do	Sylvia
Garcia	Manuel
Dominguez	Amaris
Nevarez	Crystal
Choy	Courtney
Ulleseit	Sharon
Esparza	Angel
Lucero	Jeannette

Perez	Rut
Yang	Betty
Miranda	Mark
Mora	Jessica
Tran	Vivian
Wurden	Caroline
Lee	- Mike
Gambelin	Vanessa
Nguyen	Donie
Inai	Tami
Trinh	Anh
Cercantes	Manuel
Diaz	Linda
	Minh
Nguyen	Thanh
Truong	Karis
Chan	
Chan	Linda
Chan	Noelle
Bebeau	William
Sheu	J J
Best	Liz
Mendez	Zak
Ortiz	Genesis
Zacarias	Jose
Wikramanayake	Rohan
Ballesteros	Lucia
Ortiz	Armando
Dung	Le
Garcia	Erica
Carvajal	Ramon
Sanchez	David
Solano	Brayan
Medina	Luz
Yarn	Lisa
Olson	Christa
Nanez	Laura
Diaz	Alexa
Martin	Katy
Nguyen	Joe
Ong	Neil
Murillo	Destiny
Zanzen	Ian
Rea	Christina
Vazquez	Jose

Carbajal	Kenny
Ramirez	Juana
Agulian	Lara
Boardman	Brandon
Gallegos	Jose
Senkier	John
Ehrich	Andrew
Arnaiz	Rick
Cole	Deja
Martinez	Benjamin
Estrada	Katherine
Prado	Manuel
Shinjo	Anthony
Tran	Vivian
Perez	Melissa
Dominguez	Amaris
Rizo	Ileana
Cortes	Jose
Leong	Jeffrey
Tang	Klayton
Singh	Avneet
Enriquez	Spencer
Han	James
Nguyen	Karolyn
Bautista	Esmeralda
Ball	Bryce
Barnwell	Amy
Avalos	Rebecca
Morales	Anthony
Harmount	Chris
Valentine	Lorraine
Gonzales	Lilybeth
Barnwell	Sierra
Barnwell	Sean
Hernandez	Jamie
Scardino	Sundance
Castellanos	Guadalupe
Crawford	Richard
Clark	Michelle
Dismuke	Dane
Diaz	Alexa
Mendoza	Daniel
Hussey	Rachel
Kurmel	Tara

Romanazzi	Lauren
Demissie	Berhan
San Miguel	Michelle
Molina	Manny
Duroyan	Jason
Commadore	D'mitri
Freimarck	Kevin
Sharma	Deepak
Carlos	Jissela
Abarca	Angel
Schuster	Benjamin
Kirmse	Melanie
Fatlowitz	Sierra
Poon	Clayton
Learned	Diana
Hernandez	Alejandro
Danty	Nick
Ramirez	Yareli
Orozco	Carina
Mora	Elizabeth
Najar	Raymond
Wozencroft	Andrew
Panday	Soumya
Dang	Chanh
Hassman	Cameron
Donnellan	Enrique
Flores	Ahtziri
Flores	Alejandro
Hoang	Peter
Challenor	Tynan
Chen	Chih
Do	Anthony
Gambelin	Ana
Becker	Donna
Rodriguez	Luis
Nguyen	Viviane
Reynoso	Alec
Carter	James
Zamora	Abraham
Zamora	Marilyn
Bains	Amit
Reyes	Denny
Ristow	John
Mohammad	Feda

Truong	Victor
Fernandez	Andrea
Gaxiola	Keith
Yan	Jason
Oregel	Christian
Alvernaz	Leslie
Chan	Kyle
Rayas	Juan
Lapustea	Florin
Lapuste	Madalina
Odea	Kyle
Clayton	Evan
Tran	David
Vegas	Rachel
Quinonez	Marcos
Lawler	Jesse
Vera	Mario
Gonzalez	Daniela
Pereyra	Cynthia
Su	Shu
Nguyen	jason
Rodriguez	Sharon
Prakash	Megha
Mekuria	Michael
Pagan	Jarrad
Simonis	Mary
Athavale	Anjali
Lu	Stacey
Ramirez	Edgar
Tricoli	Kristy
Rodriguez	Eric
Barrientos	Jonathan
Saucedo	Fabiola
Garcia	Ricardo
Valdovinos	Brayan
Cardenas	Jose
Alva	Jasmine
Sapien	Chantalle
Tinoco	Alfredo
Eke	Christopher
Bains	Amit
Lawler	Jesse
Vera	Mario
Velazquez	Gilberto

	gency Report of: eremonial Role B		s and Ticket/P	ass Distri	butions	A F	Public Document
100	Agency Name					Date Stamp	
	City of San Jose						Form 802
	Division, Department, or Region (if applicable)  City Manager's Office						For Official Use Only
	Designated Agency Co	ntact (N	lame, Title)				
	David Sykes, City Ma	nager					
	Area Code/Phone Num	ber E	E-mail			Amendment (Must Pro-	vide Explanation in Part 3.)
	(408) 535-8100		webmaster.manag	er@sanjoseca	a.gov	Date of Original Filing:	(month, day, year)
2.	Function or Event	Inform	ation				
	Does the agency have	e a ticke	et policy? Yes	⊠ No □ F	ace Value of	Each Ticket/Pass \$ <u>\$83</u>	8 & \$240
	Event Description: Sa	an Jose	Sharks Hockey Ga		oate(s)2	, 27 , 20	
	Event Description.		Provide Title/ Expla		rate(s)		
	Ticket(s)/Pass(es) pro	ovided b	y agency? Yes	⊠ No 🗆 If	no:		
	\\\\\-\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			14		Name of Source	
	Was ticket distribution	n made a	at the behest Yes	□ No⊠ If yes:		Official's Name (Last, First)	
	of agency official?		•				
3.	Recipients • Use Section A to identify	the agency	y's department or unit.	Use Section B to i	dentify an individ	ual. • Use Section C to identify	y an outside organization.
	A. Name of Agend	cy, Depart	ment or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose made pursu	ant to the agency's policy
	fame is	e of Indivi Last, First)		Number of Ticket(s)/ Passes		Identify one of the foll	owing:
	See attached list				Ceremonial Role Other 🗵		Income
			22		ing "Ceremonial Role" or "Other" descri rship/Administrative Ass Event		
					i	nonial Role  Other  Other  or "Other" descri	Income
	C. Name of Out	_		Number of Ticket(s)/ Passes	Describe th	e public purpose made pursu	ant 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 all	oove, is in accordance
with the requirements				

That broad and anacistand in Forte	garations room. rand rooms. In	avo vonnou anat ano anotanoution out fortal a	ovo, io in accordance
with the requirements.			
DEDSYL	D. SYRES	CITYMANAGER	3/19/2020
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)
**			
Comment:			

# San Jose Sharks vs. New Jersey Devils February 27, 2020 Attendees

<u>Last Name</u>	<u>First Name</u>	Quantity of <u>Tickets</u>
Sykes	David	2
Maguire	Jennifer	2
Ortbal	Jim	2
Riordan	Ray	2
Schembri	Jennifer	2
Wilcox	Leland	1
Ehrich	Andrew	1
Neaves	Rosario	1
Ziemba	Kate	1
Gervin	Becki	1
Jones	Mike	1
Gould	Trevor	1
Opsal	Matt	1
Orozco	Amanda	1
Boyce	Andrew	1
Szabo	Anna	1
Torralba	Danielle	1

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

Ceremonial Role Events and Ticket/Pass Distributions			A Public Document			
1.	Agency Name				Date Stamp	California 802
	City of San Jose				976 Gr	
	Division, Department, or Regi	on (if applicable)				For Official Use Only
	City Manager's Office				2019 OCT 17 PM	1:42
	Designated Agency Contact (	Name, Title)				
	David Sykes, City Manager				Amendment (Must P	rovide Explanation in Part 3.)
	Area Code/Phone Number	E-mail				
	(408) 535-8100	webmaster.manag	er@sanjosec	a.gov	Date of Original Filing: .	(month, day, year)
2.	Function or Event Infor	mation	*	1	1-	70.00
	Does the agency have a tick	8 8		ace Value of	Each Ticket/Pass \$ <u>17</u>	70.00
	Event Description: SJ Shark	ks vs. Vegas Golden  Provide Title/ Expla	Knights	Date(s)10	, 4 , 19	
	Ticket(s)/Pass(es) provided	00 (00)		f no:	Name of Source	
	Was ticket distribution made	at the behest Yes	□ No⊠ <sup>If</sup>	f yes:	Official's Name (Last, First)	
	of agency official?				Official's Name (Last, 1 list)	
3.	the a second of the first second of the second of the second of					
	• Use Section A to identify the agen	cy's department or unit.		identify an individ	ual. • Use Section C to ident	ify an outside organization.
	A. Name of Agency, Depa	artment or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose made pur	suant to the agency's policy
	B. Name of Indi	vidual	Number of Ticket(s)/		Identify one of the f	ollowing:
	(Last, Fir		Passes		identify one or the	ono unig.
	See attached list		17	If check	nonial Role  Other king "Ceremonial Role" or "Other" de County Cities Manage Event	scribe below:
					nonial Role Other C king "Ceremonial Role" or "Other" de	
	C. Name of Outside O (include address and		Number of Ticket(s)/ Passes	Describe th	e public purpose made pur	suant to the agency's policy
4	Verification					
	I have read and understand FF	PPC Regulations 1894	1.1 and 18942.	I have verified	that the distribution set f	orth above, is in accordance
	with the requirements.					
	D'DSyL	D. SYE	ES.	C	ITY MANAUS	2 10/16/19
	Signature of Agency Head or Design	nee F	Print Name		Title	(month, day, year)
	Comment:					

## San José Sharks vs. Las Vegas Golden Knights October 4, 2019 Attendees

<u>Last Name</u>	<u>First Name</u>	Quantity of Tickets
Turner	Christina	2
McHarris	Steve	2
Blount	Terry	2
Miller	Seth	2
Rich	Dan	1
Gonzalez	Gabe	1
Loventhal	Brian	1
Cahill	Carl	2
Steffens	Kent	2
Sykes	Dave	2

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California **Form** City of San Jose San Jose City For Official Use Only Division, Department, or Region (if applicable) City Manager's Office 2019 OCT 10 PM Designated Agency Contact (Name, Title) David Sykes, City Manager Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: 408 535-8100 webmaster.manager@sanjoseca.gov (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 103.00 Does the agency have a ticket policy? Yes 🛛 No 🗌 Event Description: Kings of the West 14 / 9 , Date(s) \_ Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ☐ No 🗷 Name of Source Was ticket distribution made at the behest Yes ☐ No 🗵 If yes: \_ 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 Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit of Ticket(s)/ A. **Passes** Number Name of Individual B. Identify one of the following: of Ticket(s)/ (Last, First) Passes Ceremonial Role Other X Income See attached list If checking "Ceremonial Role" or "Other" describe below: 24 Budget office appreciation Income Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization Describe the public purpose made pursuant to the agency's policy C. of Ticket(s)/ (include address and description) Passes 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 of Designee

Print Name

Comment:

#### City Manager's Budget Office Appreciation Event

#### September 14, 2019 - Kings of the West

#### **List of Attendees**

Name (Last, First)	# of Tickets
Handford, Kate	2
Altamirano, Nicole	2
Alvarez, Karina	1
Arroyo, Adali	1
Ball, Bryce	1
De Anda, Enrique	2
Duong, Bonny	1
Gold, James	2
Grant, Tresha	1
Petak, Chris	1
Resendez, Kristie	2
Ruiz, Fabiola	2
Shannon, Jim	2
Truong, Tien	2
Ubando, Selena	1
Blattman, Rachelle	1
Total	24

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California San **Form** City of San Jose For Official Use Only Division, Department, or Region (if applicable) 2019 AUG 23 PM 12: 28 City Manager's Office Designated Agency Contact (Name, Title) David Sykes Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: (408) 535-8100 webmaster.manager@sanjoseca.goc (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 117.00 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: Broadway San Jose WICKED 15 , Provide Title/ Explanation If no: Broadway San Jose Ticket(s)/Pass(es) provided by agency? Yes □ No ☒ Was ticket distribution made at the behest Yes ☐ No ☒ If yes: \_ 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 A. 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 Income Diep, Lan If checking "Ceremonial Role" or "Other" describe below: 1 City of San Jose representative at event Ceremonial Role Other X Income | Carrasco, Magdalena If checking "Ceremonial Role" or "Other" describe below: 1 City of San Jose representative at event Number Name of Outside Organization of Ticket(s)/ Passes Describe the public purpose made pursuant to the agency's policy C. (include address and description)

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4.	V۵	riti	ca	tin	n

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

SYKEJ

CITY MANAGER

8(22 L9 (month, day, year)

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

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



gency Name r of San Jose		S.
Recipients	• 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:
Davis, Rachel	1	Ceremonial Role Other Month Income  If checking "Ceremonial Role" or "Other" describe below:  City of San Jose representative at event
Obaizamomwa, Adesuwa	1	Ceremonial Role Other Income  If checking "Ceremonial Role" or "Other" describe below:  City of San Jose representative at event
		Ceremonial Role Other Income
		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
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

**Agency Report of:** Ceremonial Role Events and Ticket/Pass Distributions RECEIVED A Public Document Date Stamby C California 1. Agency Name orca City of San Jose For Official Use Only 7819 AUG 14 PM 3: 29 Division, Department, or Region (if applicable) City Manager's Office **Designated Agency Contact** (Name, Title) David Sykes, City Manager ☐ Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: . (408) 535-8111 webmaster.manager@sanjoseca.gov (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 86.00 Does the agency have a ticket policy? Yes ⊠ No 🗆 Event Description: Mubadala SV Tennis Classic Provide Title/ Explanation If no: San Jose Sports Authority Ticket(s)/Pass(es) provided by agency? Yes ☐ No 🗵 Name of Source If yes: \_ 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 Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ **Passes** Number Name of Individual B. Identify one of the following: of Ticket(s)/ (Last, First) **Passes** Ceremonial Role Other 🗵 Income Diep, Lan If checking "Ceremonial Role" or "Other" describe below: 2 City of San Jose representative at event Ceremonial Role Other 🗵 Income \_\_\_ Lomio, Michael If checking "Ceremonial Role" or "Other" describe below: 2 City of San Jose representative at event Number Name of Outside Organization of Ticket(s)/ Passes Describe the public purpose made pursuant to the agency's policy C. (include address and description) 4. Verification

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

Signature of Agency Heat or Designee

27KEZ

CITY MANAGER

8 13 19

Comment: \_

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



Agency Name							
ty of San Jose							
	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:				
	Walesh, Kim	1	Ceremonial Role Other Image Income Income If checking "Ceremonial Role" or "Other" describe below: City of San Jose representative at event				
•			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:				
			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:				
•			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:				
	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				

1.	Agency Name			oan a	Date Stamp	California OOO
•	City of San Jose			OTC	The	Form 802
	Division, Department, or Reg	ion (if applicable)		2019 JUI	18 AM 9: 24	For Official Use Only
	City Manager's Office	, , ,		T a		
	Designated Agency Contact	(Name Title)				
	David Sykes, City Manager	24 (252)				
	Area Code/Phone Number	E-mail			Amendment (Must I	Provide Explanation in Part 3.)
	(408) 535-8100 webmaster.manager@sanjoseca.gov			Date of Original Filing:	(month, day, year)	
2.	Function or Event Infor	mation			-	2002-211
	Does the agency have a tick	ket policy? Yes	⊠ No □ I	Face Value of I	Each Ticket/Pass \$ $\frac{5}{2}$	0.00
	Event Description: Thanks A	America (Ta Tinh 4)  Provide Title/ Expla.	r-or us-at	Date(s)		
	Ticket(s)/Pass(es) provided			f no: Kieu Hoa	ng Productions	
	(0) 200(00) [	-, -g, 100 j	I NOM		Name of Source	
	Was ticket distribution made	at the behest Yes [	□ No⊠ 「	f yes:	Official's Name (Last, First)	
	of agency official?				Official's Name (Last, First)	
3.	Recipients					
	• Use Section A to identify the agen	cy's department or unit. •	Use Section B to	identify an individ	ual. • Use Section C to iden	tify an outside organization.
	A. Name of Agency, Depa	ertment or Unit	Number of Ticket(s)/ Passes	Describe the	e public purpose made pu	suant to the agency's policy
			Number			
	B. Name of Indi (Last, Firs		of Ticket(s)/ Passes		Identify one of the f	ollowing:
	See attached list		24	City of San J	onial Role Other Day ing "Ceremonial Role" or "Other" de ose representative to Departments of San	attend concert to benefit
				Cereme	onial Role Other Officer Officer of "Other" de	Income
	C. Name of Outside Or (include address and		Number of Ticket(s)/ Passes	Describe the	public purpose made pur	suant to the agency's policy
		4				
	Verification I have read and understand FPI with the requirements.	PC Regulations 18944.	1 and 18942.	I have verified th	nat the distribution set fo	orth above, is in accordance
	I have read and understand FPI	PC Regulations 18944.	1 and 18942.	I have verified th	mat the distribution set for	orth above, is in accordar

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



of San Jose  Reginients							
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 Other Income Income If checking "Ceremonial Role" or "Other" describe below:					
		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:					
		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:					
		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:					
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					
See attached list	176	Community Organization to attend concert to benefit Fire & Police Departments of San Jose and Chico					
	,						
	E 5						

# Thanks America (Ta Tinh 4) July 6, 2019 Attendees

#### B.

Last Name	First Name	Quantity of Tickets
Dao	Vu	2
Giao	Hanh	2
Nguyen	Но	2
Ristow	John	1
Nguyen	MC	2
Nguyen	Janie	2
Doan	Bien	2
Tran	Phuong	2
Fanua	Mary	2
Alanis	Diana	2
Izquierdo	Noherly	2
Le	Anna	1
Do	Tu	2

#### C.

Little Saigon Business Group	3
909 Story Road, San José, CA	
Tuoi Than Thien	51
1898 Aberdeen Court, San José, CA	
Vietnamese American Roundtable	33
1511 Yosemite Drive, Milpitas, CA	
Young professionals and representatives who work	
collaboratively to research, promote, and support	
joint programs and projects to benefit the local the	
local community	
Vietnamese Volunteer Foundation	12
2264 Quimby Rd., San José, CA 95122	
Mission is to empower low income ethnic families to	
become productive participating citizens	
Catholic Charities	37
2625 Zanker Road, San José, CA	
Mission is to help people of all cultures and beliefs	
rise up out of poverty and overcome the barriers to	
self-sufficiency and wellness.	

Agency Report of: RECEIVEDA Public Document Ceremonial Role Events and Ticket/Pass Distributions 1. Agency Name Date Stamp California City of San Jose 2019 JUN 28 15 For Official Use Only Division, Department, or Region (if applicable) City Manager's Office Designated Agency Contact (Name, Title) David Sykes, City Manager ☐ Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number Date of Original Filing: (408) 535-8100 webmaster.manager@sanjoseca.gov (month, day, year) 2. Function or Event Information Yes ⊠ No ☐ Face Value of Each Ticket/Pass \$ 75.00 Does the agency have a ticket policy? Event Description: SPUR Annual Summer Party Date(s) \_\_6 12 / Provide Title/ Explanation If no: SPUR Ticket(s)/Pass(es) provided by agency? Yes □ No 🗵 Name of Source Was ticket distribution made at the behest Yes ☐ No ☒ If yes: 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 A. 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 Income See attached list If checking "Ceremonial Role" or "Other" describe below: 23 City of San Jose representative at the event Income Ceremonial Role Other \_ If checking "Ceremonial Role" or "Other" describe below: 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 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.

Comment:

# SPUR Annual Summer Party June 12, 2019 Attendees

<u>Last Name</u>	First Name	Quantity of <u>Tickets</u>
Jones	Chappie	1
Kohl	Cassidy	1
Jimenez	Sergio	2
Peralez	Raul	. 2
Diep	Lan	2
Arenas	Sylvia	1
McGarrity	Patrick	1
Foley	Pam	2
Khamis	Johnny	. 2
Walesh	Kim	1
Klein	Nanci	1
Burnham	Nicolle	1
Donato-Weinstein	Nathan	1
Hughey	Rosalynn	1
Rios	Angel	1
Romanow	Kerrie	1
Wilcox	Lee	1
Zenk	Jessica ·	1

	gency Report of: eremonial Role Events and Ticket/F	Pass Distr	ibutions	RECEIVED A	Public Document
	Agency Name		,	Date Stamp	0.125
	City of San Jose		20	town 4	Form OUZ
	Division, Department, or Region (if applicable)		20	9 APR 25 AM 11:4	For Official Use Only
	City Manager's Office				
	Designated Agency Contact (Name, Title)				/
	David Sykes, City Manager			Amendment (Must Pro	vide Evelenation in Part 2 \
	Area Code/Phone Number   E-mail			Amendment (Must F10	viue Explanation in Part 5.)
	(408) 535-8100 webmaster.manag	er@sanjosec	a.gov	Date of Original Filing:	(month, day, year)
2.	Function or Event Information		***************************************	00	0.0
	Does the agency have a ticket policy? Yes	⊠ No□ F	ace Value of	Each Ticket/Pass \$ <u><sup>60.</sup></u>	00
	Event Description: ACEC Honoring Senator Jim	Beall [	Date(s) <u>4</u>	<u>, 15 , 19</u> _	
-	Provide Title/ Expla Ticket(s)/Pass(es) provided by agency? Yes		f no: <u>HMH Eng</u>	gineers  Name of Source	
	Was ticket distribution made at the behest Yes		f yes:		
	of agency official?		•	Official's Name (Last, First)	
3.	Recipients  • Use Section A to identify the agency's department or unit.	Use Section B to	identify an individ	ual. • Use Section C to identif	y an outside organization.
	A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose made pursu	ant to the agency's policy
			,- -		· · · · · · · · · · · · · · · · · · ·
	B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes		Identify one of the foll	owing:
•	Sykes, David	1	City of San J	onial Role  Other    onial Role  Other    onial Role" or "Other" descriptions or representative at e  the Lifetime Achieven	vent honoring Senator
	Cano, Matt	1 .	Cerem If check City of San J	onial Role  Other  or "Other" descriptions of the control of the c	Income Income vibe below:
	C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes		e public purpose made pursu	
	<b>Verification</b> I have read and understand FPPC Regulations 18944	.1 and 18942. I	have verified ti	hat the distribution set fort	h above, is in accordance
	with the requirements.	WES	Ć.	The Manage To	Ularlia
	2.37	ر ــــــ		1-11 1121 2 1-12 1-14 Oc	(1601111

	gency Report of: eremonial Role Even	its and Ticket/F	Pass Dist	ributions	RECEAR	ublic Document
1.	Agency Name				That's of share City	California O O
	City of San Jose	•			OTC CA 2019 APR 10 PM	Form OUZ
	Division, Department, or Reg	ion (if applicable)			2019 APR 10 PM	For Official Use Only
	City Manager's Office					O 09.
	Designated Agency Contact	(Name, Title)		-2	-	
	David Sykes, City Manager				Amanda ant (44 / 2 and	de Control Control
	Area Code/Phone Number	E-mail		<u></u>	Amendment (Must Provid	de Explanation in Paπ 3.)
	(408) 535-8100	webmaster.manag	er@sanjose	ca.gov	Date of Original Filing:	(month, day, year)
2.	Function or Event Infor	mation		* ***	400	
	Does the agency have a tic	ket policy? Yes	⊠ No 🗆	Face Value of	Each Ticket/Pass \$ 100.0	00
	Event Description: Cesar C	havez Scholarship B	reakfast	Date(s)3	<u>, 29 , 19</u>	
	Tiplest(a)/Dass(sa) provided	Provide Title/ Expla		ıғ no: Santa Cl	ara Valley Transportation	Authority
	Ticket(s)/Pass(es) provided	by agency? Yes		II 110. <u></u>	Name of Source	
	Was ticket distribution made	e at the behest Yes		If yes:		
	of agency official?		_ 110 _		Official's Name (Last, First)	
3.	Recipients  • Use Section A to identify the agental A.  Name of Agency, Depart		Use Section B to		lual. • Use Section C to identify a	-
	B. Name of Indi		Number of Ticket(s)/		Identify one of the follow	wing:
	(Last, Fir	st)	Passes			
	Jones, Chappie		1	If checi	nonial Role	
	Davis, Dev	avis, Dev		If check	monial Role  Other  Income  Income  Coking "Ceremonial Role" or "Other" describe below: sest at the Cesar Chavez Scholarship Breakfast	
	C. Name of Outside O		Number of Ticket(s)/ Passes	Describe th	e public purpose made pursuar	nt to the agency's policy
<b>1</b> .	<b>Verification</b> I have read and understand FP with the requirements.	PC Regulations 18944	.1 and 18942.	I have verified t	hat the distribution set forth	above, is in accordance
_	D'OS'	D.Sy	LES		TYMANALER	4/10/19
	Signature of Agency Heal or Design	ee Pi	int Name		Title	(month, day, year)
	Comment:					

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



	gency Name						
City 3.	of San Jose  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)/	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:				
	Diep, Lan	1	Ceremonial Role Other Income  If checking "Ceremonial Role" or "Other" describe below:  Honored guest at the Cesar E. Chavez Scholarship  Breakfast				
	Herbert, Frances	1	Ceremonial Role Other Income I				
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:				
			Ceremonial Role  Other  Income  Income  If checking "Ceremonial Role" or "Other" describe below:				
	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				

Ί.	A manage Alama				ECEWED A	California OOO
	Agency Name			San Jo	se City Clerk	Form 802
	City of San Jose  Division, Department, or Reg	ion (if applicable)		201411	OTCA	For Official Use Only
		поп (п аррпсаые)		ZU19 MAR	28 PH 4: 34	· ·
	City Manager's Office  Designated Agency Contact	(Nama Titla)				
	David Sykes, City Manager  Area Code/Phone Number				Amendment (Must F	Provide Explanation in Part 3.)
	(408) 535-8100	E-mail webmaster.manage	er@sanjosed	ca.gov	Date of Original Filing:	(month, day, year)
2.	Function or Event Infor	mation				
	Does the agency have a ticl	ket policy? Yes [	⊠ No 🗆 📑	Face Value of	Each Ticket/Pass \$ <u>3</u> 0	0.00
	Event Description: SJ Earth	nquakes vs. Montreal	[	Date(s) <u>3</u>		
	Ticket(s)/Pass(es) provided			f no: <u>San Jose</u>	Earthquakes  Name of Source	
	Was ticket distribution made of agency official?	e at the behest Yes [	□ No⊠ <sup> </sup>	f yes:	Official's Name (Last, First)	
	Use Section A to identify the agen     Name of Agency, Department		Number of Ticket(s)/ Passes			ify an outside organization.  Suant to the agency's policy
	B Name of Indi	Ividual	Number of Ticket(s)/		Identify one of the f	ollowina:
	B. Name of Indi		Number of Ticket(s)/ Passes		Identify one of the f	ollowing:
			of Ticket(s)/	If check	Identify one of the formula Role ☐ Other ☑ ing "Ceremonial Role" or "Other" dealorse Employee Appres	Income [
	(Last, Fire		of Ticket(s)/ Passes	City of San	onial Role Other ing "Ceremonial Role" or "Other" des	Income [ scribe below: ciation Day Income [
	(Last, Fire	rganization	of Ticket(s)/ Passes	City of San C	onial Role Other Sing "Ceremonial Role" or "Other" des	Income [ scribe below: ciation Day Income [
	See Attached List  Name of Outside O	rganization	of Ticket(s)/ Passes 544 Number of Ticket(s)/	City of San C	onial Role Other Sing "Ceremonial Role" or "Other" des	Income Control Income Con
	See Attached List  Name of Outside O	rganization description)	Number of Ticket(s)/	City of San Cerem	onial Role Other Ming "Ceremonial Role" or "Other" desilose Employee Apprecionial Role Other Cing "Ceremonial Role" or "Other" desilose Employee Ming "Ceremonial Role" or "Other" desilose public purpose made purs	Income Control Income

## SJ Earthquakes vs. Montreal City of San José Employee Appreciation Day 3/2/2019

#### **Attendees**

Yu Aaro Zamora Abra Castro Adri Trinh Adri Cuello Leon Agus Quan-Tena Ailer Gaxiola Albe Ena Jr Alcil Gutierrez Aleja Brewster Alex Niles Alex Toscano Alex	aham el en stin nee orto biades andra andra is
Zamora Abra Castro Adri Trinh Adri Cuello Leon Agus Quan-Tena Ailes Gaxiola Albe Ena Jr Alcil Gutierrez Aleja Brewster Alex Niles Alex Toscano Alex Ulrich Alex Rudy Alex Patino Alfre Alba Alici Meza Alici Meza Alici Meza Alici Martinez Alma Prakash Alvis Garza Alys Dominguez Ama	aham el en stin nee orto biades andra andra is
Castro Adri Trinh Adri Cuello Leon Agus Quan-Tena Ailer Gaxiola Albe Ena Jr Alcil Gutierrez Aleja Brewster Alex Niles Alex Toscano Alex Ulrich Alex Rudy Alex Patino Alfre Alba Alici Meza Alici Reyna Allis Martinez Alma Prakash Alvis Garza Alys Dominguez Ama	el en stin nee orto biades andra andra is
Trinh Cuello Leon Quan-Tena Ailer Gaxiola Ena Jr Alcil Gutierrez Aleja Brewster Alex Niles Alex Toscano Alex Cuello Leon Agus Albe Ena Jr Alcil Gutierrez Aleja Brewster Alex Alex Alex Toscano Alex Alex Alex Rudy Alex Rudy Alex Rudy Alici Alba Alici Meza Alici Reyna Allis Martinez Alma Prakash Alvir Garza Alys Dominguez Ama	en stin nee orto biades andra andra is
Cuello Leon Quan-Tena Ailer Gaxiola Ena Jr Alcil Gutierrez Aleja Brewster Alex Niles Alex Toscano Ulrich Alex Rudy Patino Alfre Alba Alici Meza Alici Reyna Alici Reyna Alici Martinez Zavala Prakash Alvir Garza Dominguez Ailee Ailee Ailee Alys Alys Alys Alys Alys Alys Alys Alici Alys Alys Alys Alys Alys Alys Alys Alys	stin nee orto biades andra andra is
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Martinez Alma Zavala Alma Prakash Alvin Garza Alysa Dominguez Ama	
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Esparza Ange	
Vega Ange	
Moreno Ange	
Marchi Ange	
Whig Anju	
Grabowski Ann	
Villalobos Anne	J

Campalan	Anthony
Gonzalez	Anthony
Lorenzo	Anthony
Romero	Anthony
Shinjo	Anthony
Teschera	Anthony
Delgado	Araceli
Ochoa	Araceli
Hernandez	Ariana
Chavira	Arianna
Carpenter	Ariel
Gonzalez	Arlene
Tsang	Arlene
Alviar	Armand
Carrell	Austin
Hajizadeh	Avsh
Barandar	Azelia
Paras	Barbara
Singh	Barinder
Avalos	Belen
Nzeu Ndaya	Beniel
Martinez	Benjamin
Ramirez	Betty
Doan	Bien
Quindiagan	Bon
Fox	Brad
Sanchez	Brenda
Lee	Brian
Ramos	Brianna
Pantoja	Bryan
Gabler	Caiden
Orozco	Carina
Genon	Carl
Sanchez	Carlos
Velazquez	Carlos
Bermillo	Carol
Meza	Carolina
Meza	Carolina
Sgambati	Carolina
Solis	Cassandra
Pham	Cassidy
Ul-Haque	Catherine
Lopez	Cecelia
Nguyen	Cecilia
Biton	Ceferino
DIMI	Ceternio

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	David
	Davina
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Reyes	Diana
Vazquez	Diego
Garcia	Dina
Moran	Diodoro
Timoteo	Donald
Becker	Donna
Нерр	Donna
Le	Dung
Tran	Duy
Le	Dylan
Rudy	Dylan
Simon	Dylan
Dominguez	Eddie
Rocha	Eddie
Soltero	Edgar
Schreiner	Edward
Klotz	Elizabeth
Orfanel	Elrick
Rodriguez	Elton
Flores	Emmanuel
Eric Saavedra	Eric
Garcia	Erica
Lopez	Erica
Rodriguez	Estephanie
Cecena	Fabian
Garcia	Fabian
Pereira	fernando
	Florin
Lapustea Robles	Francisco
Ponciano	Frank
de Vera	Frankie
Tran	Fred
	Gabby
Romero Hanaford	Gabriel
Nuanez	Gabriel
Banks	Gabriela
Esparza	Gabriela
Ortiz	Genesis
Osuna	George
Ritz	Graham
Cajina	Greg
Velazquez	Guillermo
Torres	Gustavo

Wilson	Haidee
Nguyen	Hang
Nguyen	Hanh
Bola	Harpreet
Robinson	Heather
Ortiz	hector
Nguyen	Но
Tien Wang	Hsi
Ogamba	Ifeanyi
Afanador	Imee
Tam	Isaac
Meza	Isabel
Montano	Isabel
Nuno	Issac
Camacho	Itzel
Landeros	Ivan
Huizar	Jacob
Dao	Jacqueline
Avila	Jaimie
Dominguez	James
Mejia	James
Le	Janie
Bray	Janine
Alva	Jasmine
Clements	Jason
Gibilisco	Jason
Hu	Jason
Rios-Ramirez	Javier
Valencia	Javier
Mondala	Jeanette
Mestaz-Romero	Jeannette
Llaneza	Jeff
Tibayan	Jeff
Jackson	Jeffrey
Leong	Jeffrey
Healy	Jenna
Gonzalez	Jennifer
Guzman	Jennifer
Hernandez	Jennifer
Mai	Jenny
Cardenas	Jeremy
Lares	Jesse
Yanez	Jesse
Gonzalez	Jessica

Huybregts	Jessica
Lasek	Jessica
Welker	Jessica
Candelario	Jesus
Parra	Jesus
Simpson	Jillian
Nguyen	Jimmy
Sheu	JJ
Tabera	Joaquin
Celio	Joe
Nguyen	Joe
Brazil	John
Layman	John
Robles	John
Savercool	John
Phan	Johnny
Calegari	Jon
Jon Cicirelli	Jon
Cebula	Jonathan
Sandoval	jonathan
Gomez	Jordan
Hernandez-lara	Jorge
Ibanez	Jorge
Alvarez	Jose
Cortes	Jose
Lopez	Jose
Montes	Jose
Resendiz	Jose
Zacarias	Jose
Cabrera	Joseph
Guerrero	Joseph
Parra	Joseph
Tran	Joseph
Armenta	Jovette
Ceja	Juan
Flores	Juan
Ramirez	Juan
Aguilar	Juana
Kinney	Juana
Ramirez	Juana
Aguila	Juan
Parrish	Julian
Valerio	JuliAnn
Lucha	justin

Smith	Justina
Singh	Kamille
Caceres	Karla
Garcia	Kassandra
Berryhill	Katherine
Estrada	Katherine
Lanoie	Katherine
Ly	Katherine
Do	Kayla
Nakamoto	Kayla
Solano	Kayla
Cisneros	Keila
Drew	Kenneth
Adam-Hapner	Kerry
Do	Kevin
Freimarck	Kevin
Luong	Kevin
Huynh	Khanh
Arreola	Kiara
Roth	Kim
Kim Sommers	Kim
Belrose	Kirstin
Caidoy	Kristal
Kane	Kristine
Burkett	Kyle
Anh Bui	Lan
Agulian	Lara
Agulian	Lara
Burke	Laura
Henao	Laura
Luu	Laura
Reyes	Laura
Romanazzi	Lauren
Wright	Leo
Diaz	Leslie
Martin	Leslie
Elizondo	Lesly
Rios	Lexis
Nguyen	Lily
Chan	Linda
Poon	Linda
	Lindsay
Wong	Lisa
Casper	Lisa
Yarn	Lisa

Best	Liz
Garibay Martinez	Lizette
Diez	Lorena
Gonzalez	Louie
Chavarin	Luis
Rodriguez	Luis
campuzano	luz
Gonzalez	Luz
Medina	Luz
Ibarra	Lydia
Tram	Lynda
Best	M
Lapustea	Madalina
Bonilla	Magdaleno
Ibrahim	Mahmoud
Mohamed	Majeed
Mavi	Manmeet
Cervantes	Manuel
Duarte	Manuel
Yuriar	Marcia
Santiago	Marcos
Serrano	Marcos
Clouse	Maren
Salazar	Margaret
Nunez	Margarytho
Bulger	Margie
Miller	Maria
Perez-Cid	Maria
Garcia	Maribel
Avila	Maricela
Zamora	Marilyn
Day	Mario
Guzman	Mario
Ponce	Mario
Vela	Marisa
Maturino	Marisol
Matthiessen	Mark
Hernandez	Marta
Cruz	Martin
Gomez	Martin
Lambert	Matthew
Spencer	Meagan
Panakkal	Meenaxi
Ferguson	Meghan

Garcia	Melina
Yuriar	Melisa
Espinoza	Melissa
Montez	Melissa
Sanchez	Melissa
Cichocki	Michael
Glazer	Michael
Lomio	Michael
Rapanut	Michael
San Miguel	MICHELLE
Hernandez	Miguel
Lee	Mike
Nguyen	Mike
Nguyen	Minh
Duran	Monica
Faria	Monica
Velarde	Monica
Theodule - graves	Monique
Lara	Michael
Mohammad	Mumtaz
Nguyen	My
Burciaga	Myranda
Best	N
Nadia Webster	Nadia
Nari Ferderer	Nari
Neil Ong	Neil
Dawson	Nelson
Monico	Nicholas
Wooton	Nicholas
Hedrick	Nick
Inamine	Nicole
Yee	Nicolette
Noorishad	Nika
Daneman	Noah
Duran	Octavio
Siverts	Olivia
Abulebdeh	Osama
Villalobos	Osvaldo
Camara	Ottavio
Gill	Pam
Ceja	Patricia
Sonora	Patricia
Kelly	Patrick
Cortez	Patsy
COLOZZ	J. WOD.

Garcia	Paul
Lee	Paul
Colin	Pedro
Romero	Pedro
Saldana	Pedro
Sanchez	Pedro
Godoy	Pete
Bennett	Peter
Romero	Peter
Williams	Peter
Yang	Pey
Sok	Phaylin
Poole	Philip
White	Phillip
Adams	Preston
Keo	Rachana
Stattion	Rachel
Blattman	Rachelle
Velarde	Raelene
Ruvalcaba	Rafal
Barlow	Randy
Slayton	Ranithri
Vegas	Raquel
Najar	Raymond
Marquez	Rebecca
Mora	Rebecca
Ponce	Rebecca
Davis	Rebekah
Alvarez	Regina
Silva	Rene
Hernandez	Reyes
Sadorra	Reyjun
Martinez	Ricardo
Avalos	Richard
Logoleo	Richard
Medina	Richard
Torres	Rick
Nguyen	Ricky
Laxamana	Rina
Chhan	robert
Manford	Robert
Zades	Robert
Garcia	Roberto
Cheung	Ron
Circuit	11011

Curry	Ron
Kumar	Ron
Zarate	Ron
Tabron	Ronald
Carrasco	Rosana
Mendoza	Rosario
Ficklin	Russ
Sheelen	Ryan
Kumar	Sal
Colin	salvador
Aguirre	Sam
Camacho	Samantha
Irani	Sami
Stattion	Sandra
Gunaseelan	Sathiyavani
Darmousseh	Scarlet
Hughes	Scott
Kimizuka	Scott
Legge	Sean
Martinez	Selena
Toan	Serina
Lee	Seth
Walker	Shalanda
Cochinwala	Sharik
Lee	Sharon
Dwivedi	Shilpi
Feliciano	shirley
Fatlowitz	Sierra
Soltero	Sieun
Sandhar	Simran
Ochsner	Skyy
Palomar	Stacey
Garcia	Stephanie
Gutowski .	Stephanie
Lara	Stephanie
Ruiz	Stephany
Lowes	Stephen
Cross	Steve
Flores	Steve
Pletsch	Steve
Solorio	Steven
Vangati	Sudheer
Bradford-Moore	Sue
Mann	Sukhpreet

Unadhyayula	Curva
Upadhyayula Ganesh	Surya Swati
Moussa	
	Sy Sylvia
Trejo Imai	Tami
Garcia	Tania
	Tanita
Jha	Tanna
Marcoida	
Kurmel	Tara
Curiel	Teresa
Ibarra Gr. 200	Teresa
Chaffee	Terra
Nguyen	Thai
Vo	Thao
Griffen	Thomas
Reid	Thomas
Dang	Thulien
Pham	Thuy
Domingo	Tiffany
Garcia	Tiffany
Lewis	Tim
Manansala	Timothy
Yu	Tina
Price	Tomika
Kang	Tommy
Maqdoor	Tooryalai
Duarte	Tracy
Keifer	Tracy
Le	Trinh
Barajas	Trino
Truong	Tung
Le	Uyen
Aspera	Vanessa
Barba	vanessa
Correia	Vanessa
Santoya	Vanessa
Tharanipathy	Vanmathy
Patel	varsha
Velasquez	Veronica
Nguyen	Vicki
Sun	Vicki
Martinez	Victor
Tran	Vivian
Truong	Vivian

Nguyen	Viviane
Doan	Vy
Lin	Walter
Wong	Wanda
Ali	Warda
Sollazzi	Wendy
Mondala	Wil
Baker	William
Danko	William
Santillana	William
Gao	Xin
Ibanez	Yadira
Juarez	Yolanda
Birhanemeskel	Yonas
Struyk	Zach
Mendez	Zacharias
Gulzadah	Zahir
fames	Zoe

C	eremonial Role Even	nts and Ticket/F	ass Distr	ibutions	RECEIVED A Public Docume	
1.	Agency Name City of San Jose Division, Department, or Region (if applicable)			Date Stamp  California Form  California Form  Form  Form  For Official Use Only		
	•	Jion (It applicable)		EG 40	time law dates of the time to	
	City Manager's Office  Designated Agency Contact	(Name Title)		·	-	
	David Sykes, City Manager  Area Code/Phone Number   E-mail					
				Amendment (Must Provide Explanation in Part 3.)		
				Date of Original Filing:(month, day, year)		
2.	Function or Event Infor	Function or Event Information				
	Does the agency have a tic	ket policy? Yes	⊠ No 🗆 🖟	ace Value of	Each Ticket/Pass \$ \$\frac{\$250.00}{}	
	Event Description: Cirque Du Soleil Volta Date(s) 2 /_					
	Ticket(s)/Pass(es) provided	•		f no: Cirque D	ou Soleil	
		, , , ,		·	Name of Source	
	Was ticket distribution made of agency official?	Was ticket distribution made at the behest Yes □ No 図 If yes:				
3.	Recipients  • Use Section A to identify the ager	ncy's department or unit. •	Use Section B to	identify an individ	dual. • Use Section C to identify an outside organization.	
	A. Name of Agency, Depar	artment or Unit	Number of Ticket(s)/ Passes	Describe th	ne public purpose made pursuant to the agency's polic	
	B. Name of Indi	vidual	Number of Ticket(s)/		Identify one of the following:	
	(Last, First)		Passes			
	See attached list		20	If check	nonial Role	
				E .	nonial Role Other Income Income king "Ceremonial Role" or "Other" describe below:	
	- 1981 -	Name of Outside Organization nclude address and description)		Describe th	he public purpose made pursuant to the agency's policy	
	<b>Verification</b> I have read and understand FP with the requirements.	PC Regulations 18944.	.1 and 18942.	I have verified t	that the distribution set forth above, is in accordar	
	D:PSyl	D. Syk	23	<u>ci</u>	TY MANAGER 2/28/19	
	Signature of Agency Head or Design	ee - Pr	пи магле		riue (montin, day, year	

# Cirque Du Soleil Volta City of San José Attendees 2/13/2019

<b>Last Name</b>	First Name	<b>Oty of Tickets</b>
Hadnot	Rhonda	1
Opsal	Shelley	1
Jones	Chappie	2
Jimenez	Sergio	2
Peralez	Raul	2
Diep	Lan	2
Alanis	Diana	2
Esparza	Maya	2
Arenas	Sylvia	2
Foley	Pam	2
Khamis	Johnny	2

	gency Report of: eremonial Role Even	ts and Ticket/F	ass Distr	ibutions	RECEIVED A	Public Document
	Agency Name Sar				California 802	
	City of San Jose	,			OTC per	
	Division, Department, or Reg	ion (if applicable)		2019	JAN 18 PM 2: 39	For Official Use Only
	City Manager's Office			20,7	DAN 10 111 2. 33	
	<b>Designated Agency Contact</b>	(Name, Title)				
	David Sykes, City Manager				Amendment (Must Pr	ovide Explanation in Part 3.)
	Area Code/Phone Number			]	ovido Explanador III r dir. e.,	
	(408) 535-8100	webmaster.manag	er@sanjosed	ca.gov	Date of Original Filing: _	(month, day, year)
2.	Function or Event Infor				20	0.00
	Does the agency have a tick	ket policy? Yes	🗵 No 🗌 📑	Face Value of	Each Ticket/Pass \$ 20	0.00
	Event Description: Bay Area	a Bach  Provide Title/ Explai		Date(s)1	<u>, 6 , 19</u>	
	Ticket(s)/Pass(es) provided		nation □ No ⊠ 「	If no. San Jose	Sports Authority	
	Holici(o)// abb(cb) provided	by agency: Test			Name of Source	
	Was ticket distribution made	at the behest Yes [	□ No⊠ <sup>I</sup>	If yes:	Official's Name (Last, First)	
	of agency official?					
3.	Recipients		II Cdi D4	11416		C
	• Use Section A to identify the agen	.cys department or unit.	Number	Identity an individ	ual. • Use Section C to Identif	ry an outside organization.
	A. Name of Agency, Depa	artment or Unit	of Ticket(s)/	Describe th	e public purpose made purs	uant to the agency's policy
			газэсэ			
					\$	
	B. Name of Indi		Number of Ticket(s)/ Passes		Identify one of the fo	llowing:
	See Attached List			Cerem	onial Role 🗵 Other 🗌	Income
	dee Attached List		31		ing "Ceremonial Role" or "Other" desc tball Championship Eve	
				Representat		one only or our bose
					onial Role Other O	Income [
				If check	ing "Ceremonial Role" or "Other" desc	nbe below:
	Name of Outside O	rganization	Number			
	C. (include address and		of Ticket(s)/ Passes	Describe the	e public purpose made pursi	uant to the agency's policy
4.	Verification		_			
	I have read and understand FP	PC Regulations 18944.	.1 and 18942.	l have verified t	hat the distribution set for	th above, is in accordance
with the requirements.			•		1 1 %	
	- March	<u>D.Sy</u>	KEZ	<u> </u>	ITY MANAGOR	111619
	Signature of Agency Head <b>y</b> or Design	e Pri	int Name		▼ Title	(month, day, year)
	Comment:					

## BAY AREA BASH January 6, 2019

### Attendees

<b>LAST NAME</b>	FIRST NAME	<b>QTY OF TICKETS</b>
Walesh	Kim	2
Zelalich	Blage	2
Iglesias	Melina	2
Turnipseed	Tammy	1
Trede	Troy	2
Casper	Brandon	2
Kline	Kelly	2
Groen	Mary Anne	2
Jones	Chappie	2
Aguila	Juan Carlos	2
Diep	Lan	2
Davis	Dev	2
Goings	Shirley	2
Khamis	Johnny	2
Low	David	2
Sun	Vicki	2

C	eremonial Role Even	ts and Ticket/F	Pass Distr	ibutions	RECEIVEE	_ A P	<u> ublic Document</u>
1.	Agency Name		•	San	Jose Date Stamp	erk	California 802
	City of San Jose				STUR	9	
	Division, Department, or Reg	AN 18 PM 2:	39	For Official Use Only			
	City Manager's Office						
	Designated Agency Contact	(Name,Title)			]		
	David Sykes, City Manager				Amendment	(Must Prov	ide Explanation in Part 3.)
	Area Code/Phone Number E-mail				<del>_</del>		
	(408) 535-8100	webmaster.manag	er@sanjosed	a.gov	Date of Original F	iling:	(month, day, year)
2.	Function or Event Infor					100	00
	Does the agency have a tick	ket policy? Yes	⊠ No 🗆 🖟	Face Value of	Each Ticket/Pass	s \$ <u>100</u>	.00
	Event Description: Taste of	Championship  Provide Title/ Expla	[	Date(s)1	<u>/ 6 / 19</u>		
	Ticket(s)/Pass(es) provided	•		f no: <u>San Jose</u>	Sports Authority Name of Source	<u>/</u>	
	Was ticket distribution made of agency official?	e at the behest Yes	□ No⊠ <sup>I</sup>	f yes:	Official's Name (Last	; First)	
3.	Recipients					<b>.</b>	
	• Use Section A to identify the agen	cy's department or unit. •		identify an individ	lual. • Use Section C t	o identify	an outside organization.
	A. Name of Agency, Depa	rtment or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose ma	de pursua	ant to the agency's policy
	B. Name of Indi	vidual	Number		Months		
	(Last, Fire		of Ticket(s)/ Passes		Identify one o	n the lond	owing.
	See Attached List		10	If check	ing "Ceremonial Role" or "O tball Championsh		Income Control of San Jose nt - City of San Jose
					nonial Role O	ther   Other" describ	Income Income
	C. Name of Outside Or (include address and		Number of Ticket(s)/ Passes	Describe the	e public purpose mad	de pursua	ant to the agency's policy
1							
	<b>Verification</b> I have read and understand FP	PC Regulations 18944	.1 and 18942.	I have verified t	hat the distribution	set forth	above, is in accordance
_	with the requirements.	~ -	_				صا يا.
45	12 TAY	<u> </u>	4KES	<u> </u>	ITY MANA	uen	_ 111814
	Signature of Agency Head or Designo	ee Pr	rin <b>₹</b> Name		▼ Title		(month, day, year)
	Comment:						

# TASTE OF CHAMPIONSHIPS January 6, 2019

### Attendees

LAST NAME	<b>FIRST NAME</b>	<b>QTY OF TICKETS</b>
Jones	Chappie	2
Tran	David	2
Davis	Dev	2
Khamis	Johnny	2
Sun	Vicki	2

C	<u>eremonial Role Even</u>	ts and Ticket/P	ass Distr	ibutions			<u>ic Docume</u>	
1.	Agency Name City of San Jose				Date Stamp	Cal	ifornia 80	2
					0701			
	Division, Department, or Reg	ion (if applicable)		2	019 JAN 18 PM	Z: 39 F	or Official Use Only	
	City Manager's Office							
	Designated Agency Contact (Name, Title)							
	David Sykes, City Manager				Amendment (Mu	et Provide Evi	planation in Part 3 \	
	Area Code/Phone Number	E-mail				st i rovide Exp	nananon in r art o.,	
	(408) 535-8100	webmaster.manag	er@sanjosed	a.gov	Date of Original Filin	g:	h, day, year)	
2.	Function or Event Infor	mation				450.00		
	Does the agency have a tick		⊠ No □ F	ace Value of	Each Ticket/Pass \$	150.00		
	Event Description: AT&T Pl	aylist Live!	[	Date(s)1	<u>/ 4 / 19</u>			
		Ticket(s)/Pass(es) provided by agency? Yes □ No ☑ If no: San Jose Sports Authority  Name of Source						
	Was ticket distribution made of agency official?	e at the behest Yes	□ No⊠ <sup>l</sup>	f yes:	Official's Name (Last, Fir	st)		
3.	Recipients • Use Section A to identify the agen	cy's department or unit.	Use Section B to	identify an individ	ual. • Use Section C to id	entify an out	side organization.	
	A. Name of Agency, Depa		Number of Ticket(s)/ Passes		e public purpose made p			y
	B. Name of Individual (Last, First)		Number of Ticket(s)/ Passes		Identify one of the following:			
	See Attached List		18	If check	onial Role	" describe below.		
				i .	onial Role  Other Other or "Other"	describe below:	Incom	• <u> </u>
	C. Name of Outside Organization (include address and description)		Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the		he agency's policy		
	No wife and a m							_
	<b>Verification</b> I have read and understand FPI	DO Dogulations 19011	1 and 100.40	l hava varifiad t	hat the distribution so	t forth oho:	n ie in accorda	200
	i nave read and understand FPI with the requirements.	PC Regulations 18944	.1 and 16942.	i nave venned d	nat the distribution set	: IOITH ADOV	e, is ili accorda	ice
•	7.001		. 1/5-5	_	7 174 Ma	מרט	1/12/11	2
-	Signature of Agency Head or Designe	<u>ー</u> ア・タダ	int Name		Title		(month, day yea	[
	Signature of Agoney Head of Design	14			.140		(	,
	Comment:			e.		-		

# AT&T PLAYOFF PLAYLIST LIVE! January 4, 2019

### Attendees

LAST NAME	FIRST NAME	<b>QTY OF TICKETS</b>
Hadnot	Rhonda	2
Davis	Rachel	2
Ceja	Patricia	2
Diep	Lan	2
Davis	Dev	2
Fazal	Alicia	1
Gallegos-Cordero	Jasmine	1
Patrick Connelly	Shane	2
Zelalich	Blage	2
Walesh	Kim	2

	gency Report of: eremonial Role Even	ts and Ticket/F	Pass Distr	ibutions	RECEIVED AP	ublic Document
1.	Agency Name		,	•	all Jobate Stamp Clerk	California 802
	City of San Jose				orc m	
	Division, Department, or Reg	ion (if applicable)		20	18 OCT 25 PM 1:48	For Official Use Only
	City Manager's Office					
	Designated Agency Contact	(Name, Title)				
	David Sykes, City Manager					
	Area Code/Phone Number	E-mail			Amendment (Must Provi	de Explanation in Part 3.)
	(408) 535-8100	webmaster.manag	jer@sanjosed	ca.gov	Date of Original Filing:	(month, day, year)
2.	Function or Event Infor	mation			75.0	0
	Does the agency have a tic	ket policy? Yes	⊠ No 🗆 🛚 I	Face Value of	Each Ticket/Pass \$ $\frac{75.0}{}$	<u> </u>
	Event Description: Warriors	Community Mix & N	Mingle [	Date(s)10	<u>, 12 , 18</u>	
	Ticket(s)/Pass(es) provided	•		f no: Golden S	State Warriors  Name of Source	
	Was ticket distribution made	at the behest Vac		f yes:		
	of agency official?	at the beliest Yes	L NOM .	. y 00. <u></u>	Official's Name (Last, First)	
3.	Recipients  • Use Section A to identify the agen	cy's department or unit.	Use Section B to	identify an individ	ual. • Use Section C to identify a	an outside organization.
	A. Name of Agency, Depa	urtment or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose made pursua	nt to the agency's policy
	B. Name of Indi		Number of Ticket(s)/ Passes		Identify one of the follo	wing:
	See Attached List		36	If check Warriors Cor	onial Role  Other  Othe	
				Cerem	onial Role Other ing "Ceremonial Role" or "Other" describe	Income Income
	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		
				-		
	-					
	<b>Verification</b> I have read and understand FP.	PC Regulations 18044	1 and 180/12	I have verified to	hat the distribution set forth	ahove is in accordance
	with the requirements.	The Carlo	und 10942.	, navo vermea u	The man and a control of the man and a control of the control of t	as lacella
	Signature of Agency Head or Design	ee Pr	rint Name		Title Title	(month, day, year)
	Comment:					

# Warriors Community Mix and Mingle/Preseason Game City of San José Attendees 10/12/18

<u>Last Name</u>	First Name	<b>Oty of Tickets</b>
Fong	Mason	1
Davis	Rachel	1
Ramos	Kivani	1
Jones	Chappie	1
Ramos	Christina	1
Dang	Thulien	1
Ngo	Stephen	1
Yee	Irie	1
Carrasco	Magdalena	1
Torres	Omar	1
Herbert	Frances	1
Navarro	Jennifer	2
Gray	Tray	1
Perez	Bianca	1
Nguyen	Long	1
Sinwongsa	Souny	1
Arenas	Sylvia	1
McGarrity	Patrick	1 .
Fazal	Alicia	1
Rocha	Don	2
Goings	Shirley	1
Basnet	Shivani	1
Kobylinski	Grace	1
Fedor	Denelle	1
Sykes	Dave	2
Schmanek	Gloria	2
Neaves	Rosario	2
Walesh	Kim	2
Hughey	Rosalynn	2

**Ceremonial Role Events and Ticket/Pass Distributions** A Public Document SEN JODAte StaimpClerk 1. Agency Name California Form City of San Jose For Official Use Only 2018 OCT 25 PM 1:48 Division, Department, or Region (if applicable) City Manager's Office Designated Agency Contact (Name, Title) David Sykes, City Manager Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: (408) 535-8100 webmaster.manager@sanjoseca.gov (month, day, year) 2. Function or Event Information Yes ☑ No ☐ Face Value of Each Ticket/Pass \$ 25.00 Does the agency have a ticket policy? Event Description: SJ Earthquakes vs. Atlantic United Date(s) 9 / 19 / 18 Provide Title/ Explanation If no: San Jose Earthquakes Ticket(s)/Pass(es) provided by agency? Yes □ No 🛛 Name of Source 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 Α. Passes Number Name of Individual В. Identify one of the following: of Ticket(s)/ (Last, First) Passes Other 🗵 Ceremonial Role Income See Attached List If checking "Ceremonial Role" or "Other" describe below 367 City of San Jose Employee Appreciation Day Income \_\_\_ Ceremonial Role Other 🔲 If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization Describe the public purpose made pursuant to the agency's policy C. of Ticket(s)/ (include address and description) Passes 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. Comment:

### SJ Earthquakes vs. Atlanta United

## City of San José Employee Appreciation Day Sept. 19, 2018

### **Attendees**

### LAST NAME

### FIRST NAME

LASI NAME	<u>FIRST NAME</u>
Nguyen	Minh
Dao	Jacqueline
Cisneros	Keila
Ogana	Andrea
Valenzuela	Jonathan
Wong	Lindsay
Nguyen	Andrew
Siebert	David
Chheuy	Melissa
Nasiri	Afsaneh
Rulloda	Warren
Rois	Joe
Sole	Jeanne
Martinez	Ricardo
Brewster	Alex
Song	Lulu
Mandrekar	Gitanjali
Day	Jason
Grabowski	Ann
Madriz	Denisse
Nguyen	Philip
Mendoza- Ortiz	Lizette
Wozencroft	Andrew
Lewis	Jon
Aguila	JC
Pham	Tina
Ardalan	Aman
Shalman	Anatoly
Mendez	Zacharias
Trejo	Liana
Yu-Taylor	Tina
Fong	Patrick
Jha	Tanita
Corona	Eduardo
Tran	Fred
Dominguez	Eddie
Meyere	Chloe
Bernabe	Sandra

Parimanam	Ravendran
Cardenas	Daniel
Villanueva	Eunise
Phan	
	Johnny
Kaur	Sarbjeet Farris
Owenati	
Morado	Henry
Nguyen	Karolyn
Sabando	Edwardson
Ibrahim	Mahmoud
Noble	Stephanie
Janssen	Jourdan
Rodrock	Bobby
Duong	Shirley
Harvey	Brittney
Crum	Barb
Van de Pol	Helen
Barragan	Juan
Hoang	Catherine
Macaraeg	Rhodora
Crawford	Liam
Sanchez	Beatriz
Imada	Dawn
Farshidi	Faramarz
Torres	Omar
Tran	Huong
Meltzer	John
Corrales	Jeremy
Holthouse	Justin
Gibilisco	Jason
Best	Liz
Radhakrishnan	Sachin
Beltran	Luisiana
Arreola	Kiara
Alvarez	Jesse
Morales	Tomas
Herbert	Frances
Spear	Robin
Chen	Victor
Alfaro	Monica
Thompson	Robin
Wong	Wanda
Hogan	Davison
Zhang	Elizabeth
Litarig	плисан

Hoang-Mendoza	Cathy
Kang	Tommy
Sanchez	David
Ruvalcaba-Herrera	Rafael
Cendana	Maxe
Pujalet	Maile
Но	Kent
Reyes	Samuel
Orozco	Amanda
Martin	Leslie
Laxamana	Rina
Arellano	Jessica
Kumar	Ron
Hern	Jennifer
Luong	Andrew
Luu	Dat
Curiel	Teresa
Reyes	Diana
Ananth	Akilan
Lee	Sharon
Esquivel	Elizabeth :
Zacarias	José
Vo	Khuong
Johnson	Aric
Garcia	Tania
Garcia	Roberto
Park	Peter
Abarca	Angel
Mora	Rebecca
Dinga	Carl
Garcia	Jennifer
Nguyen	Samdra
Imai	Tamilynn
Wessling	Cheryl
Clark	Michelle
Dinh	Vy
Mobin	Hamza
Sana	Justin
Nguyen	Tram
Trinh	Adrien
Llaneza	Jeffrey
Mayorga	Raul
Mulugeta	Dawit
Sandoval	Lilia

Levasseur	Chase
Garcia	Maribel
Ramirez	Yareli
Duran	Octavio
Santos	Matthew
DeVaul	Gail
Caidoy	Kristal
Avalos	Miguel
Lujan	Danielle
Harrison	Tony
Chavez	Felix
Tamayo	Jeannette
Enriquez	Miguel
Tamayo	Gabriela
Wagemann	Shawn
Beaton	Drake
Cheng	Buu
Barrera Poma	Betsy
Darmousseh	Scarlet
Sy	Moussa
Ta	Michael
Raposo	David
Badal	Sargon
Chavez	Martha
Ponce	Rebecca
Lopez	Giovanni
Legge	Sean
Medina	Luz
Chamberlain	Amy
Ochoa	Enedelia
Do	Kayla
Cravens	Tony
Barroga	Dominic
Chun	Anna
Moreno	Joe
Tibayan	Jeff
Prakash	Alvina
Trejo	Sylvia
Bailey	Cordell
Gonzalez	Anthony
Tapaha	Darryl
Maloy	Megan
Gallegos	Justin
Olegario	Oliver

Zasly	Katie
Johnson	Dan
Marcil	Jamie
Santillana	William
Jobe	Greg
Bonsall	Casey
Solis	Ed
Cheung	Ron
Khek	Pauline
Ramirez	Alysia
Guichard	Julie
Brunelli	Brianna
Duong	Avan
Diep	Lan
Ramirez	Betty
Esparza	Gabriela
Garibay Martinez	Lizette
Monico	Nicholas
Guzman	Jennifer
Sanchez	Brenda
Candelario	Jesus
Condit	Jason
Briseno	Armando
Sree	Padma
Irwanto	Santana
Doyle	Richard
Koosha	Sam
Maher II	Timothy
Lipton	Alan
Chen	Dennis
Jang	Edward
Savage	Matt
Matthiessen	Mark
Romero	Tanya
Mann	Sukhpreet
Romero	David
Keller	Dan
Cortez	Patsy
Wright	Kenney
Orellana Orellana	Kat
Jones	Jessica
Batin	Terri
Gambelin	Vanessa
Alarcon	Rosanne
Alaicoli	Rosainie

Lara	Michael
Favero Neto	Alomir
Carter	Jamil
Adgar	James
Ushiro	Aaron
Johnson	Clare
Lewis	Tim
Quintero	Quetcy
Singh	Barinder
Kurze	Pam
Bronte	Nicholas
Lambert	Zuhayl
Lambert	Matthew
Bernedo	Chris
Knight	Riley
Sheelen	Ryan
Garcia	Clarissa
Alvarez Lizarraga	Ana
Gubatina	Victor
Nodal	Magdelina
Alvarez	Regina
Huybregts	Jessica
Bray	Rebekah
Quindiagan	Bon
Zhou	Jian
Shull	Sarah
Santiago	Marcos
Morales	Daneil
Mohammad	Mumtaz
Agulian	Lara
Gulzadah	Zahir
Patrick Connolly	Shane
Serrano	Julio
Teschera	Anthony
Kennedy	Megan
Borrelli	Juan
Donnell	Nancy
Hernandez-lara	Jorge
Flores	Ahtziri
Moezzi	Linda
Rocha	Michael
Ali	Sofia
Flores	Alejandro
Riddle	Scott
	1~3000

.

Ceja	Juan
Truong	Tung
Kurmel	Tara
Cocanour	Karen
Gaxiola	Alberto
Warne	
	Jeanette
Rodriguez	Roselyn
Vital	Carmen
Garcia	Aracely
Ramirez	Alejandra
Haddox	Suean
Villalva	Raul
Sneathen	Robert
Arnaiz	Rick
На	Shelley
Mai	Hong
Schreiner	Edward
Howard	Nora
Fraume	Andrea
Poon	Linda
Markel	Laura
Juarez	Christine
Cebrero	Francisco
Barrera Poma	Betsy
David Lerma	David
Olegario	Oliver
Hoang	Shoko
Hitchcock	Andrew
Mondala	Wil
Mondala	Jeanette
Sheu	ЈЈ
DaSilva	Ross
Magahiz	Maxine
Donnell	Nancy
Nunez	Paul
Ruch	Leah
Cullen	Julie
Castaneda	Alex
Faria	Monica
Rebeterano	Melinda
Hill	Jennifer
Dang	Thulien
Luong	Jennifer
Dwivedi	
DWIVEGI	Shilpi

F	
Best	Nolan
Best	Molly
Oxnam	Katie
Voltaire	Francois
Minor	Natalie
Janssen	Jeff
Batre	Hugo
Do	Kevin
Walker	Shalanda
Ramoz	Adam
Sok	Phaylin
Dominguez	Amaris
Tkacheff	Mike
Domingo	Tiffany
Davis	Rebekah
Rebeterano	Steven
Zavala	Alma
Avila	Maricela
Keller	Dan
Singh	Kamille
Garcia	Melissa
Herrera	Robert
Ruiz	Alexis
Matta ———	Amanda
Best	Nolan
Hightower	Nicholas
Archer	Sean
Bandy	Richard
Zizana	Jackie
Solorio	Steven
Cordova	Elsa
Barnes	Rosemary
Hernandez	Anna
Magnuson	Kate
Kortright	Veronica
Biton	Ceferino
Yee	Irie
Ngo	Stephen
Pletsch	Steve
Garcia	Paul
Toribio	Chris
Rios	Cecilia
Welsh	Jeb
Curry	Valerie
Juliy	v ateric

Larios	Daniel
Barajas	Trino
Aguirre	Sam
Alvarez	Jose
Soltero	Jose
Ceja	Juan
Colin	Pedro
Vasquez	Elaina
Lapustea	Florin
Lapustea	Madalina
Legge	Sean
Brazil	John
Takash	Tim
Carter	Jamil
Koenig	Jon
Strangis	Gennaro
Hatzenbuhler	Bret
Griffen	Thomas
Zepeda	Maria
Zamora	Abraham

	Agency Name			Jan	OSE Coate Stamp K	Public Document	
	City of San Jose				ote 1	Form 802	
	Division, Department, or Reg	iion (if applicable)		2018 SI	P 28 PM 2: 38	For Official Use Only	
	City Manager's Office	, et (// applicable)					
	Designated Agency Contact	(Name Title)			4		
	David Sykes, City Manager	•					
	Area Code/Phone Number	E-mail			Amendment (Must Provide Explanation in Part 3.)		
	(408) 535-8100	webmaster.manag	er@sanjosed	ca.gov	Date of Original Filing:	(month, day, year)	
2.	Function or Event Infor	mation					
	Does the agency have a tick	ket policy?	⊠ No 🗆 🗎	Face Value of	Each Ticket/Pass \$ 7	5.00	
	Event Description: SAP Cer	nter 25 Year Celebra	ntion		<u>, 14 , 18</u>		
		Provide Title/ Expla	nation	s - San Jose	e Sharks/SAP Center	at San Jose	
	Ticket(s)/Pass(es) provided	by agency? Yes	∐ No⊠ I	T no: <u>Gair 6666</u>	Name of Source	at oan ooo	
	Was ticket distribution made	e at the behest Yes		f yes:	Official's Name (Last, First)		
	of agency official?	100	_ 140 <u></u>		Official's Name (Last, First)		
	A. Name of Agency, Depa	artment or Unit	Describe th	e public purpose made pur	suant to the agency's policy		
			Number				
	B. Name of Indi		Number of Ticket(s)/ Passes		Identify one of the f	ollowing:	
	B. Name of Indi (Last, Fin		of Ticket(s)/	If check	nonial Role X Other Cing "Ceremonial Role" or "Other" de.	Income [	
	(Last, Fire		of Ticket(s)/ Passes	Honored Gu	nonial Role X Other Cing "Ceremonial Role" or "Other" de.	Income C scribe below: see 25 Year Celebration Income C	
	(Last, Fire	rganization	of Ticket(s)/ Passes	Honored Gu Cerem	onial Role  other	Income [ scribe below: see 25 Year Celebration Income [	
	See attached list  Name of Outside On	rganization	of Ticket(s)/ Passes 17 Number of Ticket(s)/	Honored Gu Cerem	onial Role  other	Income Coribe below: See 25 Year Celebration Income Coribe below:	
	See attached list  Name of Outside On	rganization	of Ticket(s)/ Passes 17 Number of Ticket(s)/	Honored Gu Cerem	onial Role  other	Income [ scribe below: see 25 Year Celebration Income [ scribe below:	
<u> </u>	See attached list  Name of Outside On	rganization	of Ticket(s)/ Passes 17 Number of Ticket(s)/	Honored Gu Cerem	onial Role  other	Income [ scribe below: see 25 Year Celebration Income [ scribe below:	
	C. Name of Outside On (include address and	rganization description)	of Ticket(s)/ Passes  17  Number of Ticket(s)/ Passes	Honored Gu  Cerem If check	nonial Role \( \overline{\text{M}} \) Other \( \overline{\text{Ling "Ceremonial Role" or "Other" delests at SAP at San Journal Role \( \overline{\text{M}} \) Other \( \text{Ling "Ceremonial Role" or "Other" deleter the public purpose made pure	Income [ scribe below: see 25 Year Celebration Income [ scribe below: scribe below:	
	See attached list  C. Name of Outside Or (include address and	rganization description)	of Ticket(s)/ Passes  17  Number of Ticket(s)/ Passes	Honored Gu  Cerem If check	nonial Role \( \overline{\text{M}} \) Other \( \overline{\text{Ling "Ceremonial Role" or "Other" delests at SAP at San Journal Role \( \overline{\text{M}} \) Other \( \text{Ling "Ceremonial Role" or "Other" deleter the public purpose made pure	Income Control of the scribe below: see 25 Year Celebration Income Control of the scribe below:  suant to the agency's policy	

### SAP AT San José 25 YEAR CELEBRATION Friday, September 14, 2018

<b>LAST NAME</b>	FIRST NAME	<b>QTY OF TICKETS</b>
Jones	Chappie	2
Jimenez	Sergio	2
Carrasco	Magdalena	1
Davis	Dev	1
Arenas	Sylvia	2
Khamis	Johnny	1
Torres	Omar	1
Patrick Connelly	Shane	1
Moua	Louansee	1
Sykes	David	2
Walesh	Kim	2
Trujillo	Ted	1

C	eremonial Role Even	ts and Ticket/P	'ass Distr	ibutions	RECE	: IVE (A P	ublic Doc	ument
1.	Agency Name City of San Jose Division, Department, or Region (if applicable)				RECEIVE A Public Doct			202
								UUZ
					2018 AUG 23	PM 2: L	For Official U	se Only
	City Manager's Office						. 1	
	Designated Agency Contact (Name, Title)				]			
	David Sykes, City Manager				Amendment (Must Provide Explanation in Part 3.)			Part 3 )
	Area Code/Phone Number	E-mail			]	(		
	(408) 535-8100	webmaster.manag	er@sanjosec	a.gov	Date of Origina	ıl Filing:	(month, day, year)	
2.	Function or Event Infor	mation		· ,	<u> </u>			
	Does the agency have a tick	ket policy? Yes	⊠ No □ F	ace Value of	Each Ticket/Pa	ass \$ <u>55.00</u>	)	
	Event Description: Circus V				<u>, 12 , 18</u>		3 , 13 ,	18
	Event Description.	Provide Title/ Expla	nation			<u>-</u>		
	Ticket(s)/Pass(es) provided	by agency? Yes i	□ No⊠ I	f no: <u>Circus V</u>	/argas			
			14	f voo	Name of Source			
	Was ticket distribution made of agency official?	eat the benest Yes	No ⊠ □	. yes	Official's Name (L	ast, First)		
	or agency official?							
3.	Recipients							
	• Use Section A to identify the agen	cy's department or unit. •	Use Section B to	identify an individ	dual. • Use Section	C to identify a	n outside organi	zation.
	Δ Name of Agency, Depa	ertment or Unit	Number of Ticket(s)/	Describe the public purpose made pursuant to the agency's poli				
	A. Name of Agency, Depa	atment of one	Passes	Describe th	ie public purpose i	naue pursuai	it to the agency	s policy
	B. Name of Indi	Number of Ticket(s)/		Identify on	e of the follow	wing:		
	(Last, Fire	<b>3()</b>	Passes					<u> </u>
	Jimenez, Sergio				nonial Role 🔀 king "Ceremonial Role" oi	Other  Other	helow	Income
	^		2		est at debut of i			s show
	Diep, Lan				nonial Role 🔀 king "Ceremonial Role" or	Other  Other  Other describe	helow:	Income
			2		est at debut of			is show
			Number	ina mwala makifiki a M		en 187au (j. leta lu		4 1
	C. Name of Outside Or (include address and	of Ticket(s)/ Passes	Describe th	e public purpose n	nade pursuar	nt to the agency'	s policy	
		and the heart of the control of the first of	rasses		The August Artist Charles	The Court of the C		
							,	
1	Verification		I	l				
	I have read and understand FPI	DC Regulations 19014	1 and 180/2	l have verified t	hat the distribution	on eat farth	ahovo is in co	nordanos
	with the requirements.	O Negulations 10944.	. i aiiu 10942. l	nave venneu l	กละ เกฮ นเรยเมนแ(	ni odliUilli	anove, is ili do	coruanic <del>e</del>
~	ア・クク・	Davis	SYKES	c.	TY MANA	4.50	مام	3/10
-	Signature of Agency Head or Designa		int Name	<u> </u>	Title	346	(month,	day, year)
	•							-
	Comment:							

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



	gency Name						
	r of San Jose  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:				
	Moua, Louansee	2	Ceremonial Role  Other  Income  Income  If checking "Ceremonial Role" or "Other" describe below:  Honored guest at debut of new 2018 Circus Vargas show				
	Arenas, Sylvia	2	Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:				
			Honored guest at debut of new 2018 Circus Vargas show				
	Rocha, Don	2	Ceremonial Role				
		-	Honored guest at debut of new 2018 Circus Vargas show				
	Khamis, Johnny	0	Ceremonial Role				
		2	Honored guest at debut of new 2018 Circus Vargas show				
	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				
	<i>a</i>						

	gency Report of: eremonial Role Ever	nts and Ticket/I	Pass Distr	ributions	RECE	IVEN A Pul	blic Document		
	Agency Name				San Joses	Gilly Cler C	California Ong		
	City of San Jose				DTU	v I	Form OUZ		
	Division, Department, or Reg	jion (if applicable)		2	018 JUN 29	AM 10: 46	For Official Use Only		
	City Manager's Office			7		AII 10- 49			
	Designated Agency Contact (Name, Title)				1				
	David Sykes, City Manager								
	Area Code/Phone Number				_	ent (Must Provide	Explanation in Part 3.)		
	(408) 535-8100	webmaster.manag	ger@sanjosed	ca.gov	Date of Origin	nal Filing:	onth, day, year)		
2.	Function or Event Infor	mation				050.00			
	Does the agency have a tic	ket policy? Yes	⊠ No □	Face Value of	Each Ticket/F	Pass \$ 250.00			
	Event Description: Mineta	Fransportation Institu	ute Award	Date(s) <u>6</u>					
	Ticket(s)/Pass(es) provided	•		f no: <u>Mineta T</u>					
	NATE - 42-1-4 -P-4-25 - 42-1		~	f vos:	Name of Sour	ce			
	Was ticket distribution made of agency official?	e at the benest Yes	□ No⊠ ¹	f yes:	Official's Name	(Last, First)			
3.	Recipients • Use Section A to identify the ager	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, Dep	artment or Unit	Number of Ticket(s)/ Passes	Describe th	ie public purpose	e made pursuant	to the agency's policy		
	B. Name of ind	Number of Ticket(s)/		Identify c	one of the following	ng:			
	(Last, FII	Passes	_	¬					
	Khamis, Johnny	1	Ceremonial Role Other Incom  If checking "Ceremonial Role" or "Other" describe below:  Annual Mineta Transportation Institute Board of Trustee  Awards and Convocation Banquet						
	Diep, Lan	1	Cerem If check	nonial Role  king "Ceremonial Role"	Other  Other of the control of the c				
					ta Transporta Convocation		Board of Trustees'		
	C. Name of Outside Organization (include address and description)		Number of Ticket(s)/ Passes	Describe th	e public purpose	made pursuant t	to the agency's policy		
1	Verification				e.				
	I have read and understand FF	PPC Regulations 1894	4.1 and 18942.	I have verified t	hat the distribu	tion set forth ab	oove. is in accordance		
-	with the requirements.	. C. toganamerra rec.	.,, .,, .,, ., ., ., ., .,		r				
	アンシュし	DAVIT	SYKE		TH MANA	rwor	6/28/18		
-	Signature of Agency Head or Design		Print Name	<u> </u>	Title		(month, day, year)		
	Comment:								

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

3.



gency Name		
y of San Jose  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:
Davis, Dev		Ceremonial Role Other M Income  If checking "Ceremonial Role" or "Other" describe below:  Annual Mineta Transportation Institute Board of Trustees'  Awards and Convocation Banquet
		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
		Ceremonial Role  Other  Income I If checking "Ceremonial Role" or "Other" describe below:
	Number of Ticket(s)/ Passes	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
C. Name of Outside Organization (include address and description)		Describe the public purpose made pursuant to the agency's policy



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

C	Ceremonial Role Events and Ticket/Pass Distributions				A Public Document			
1.	Agency Name				Date Stamp	California 802		
	City of San Jose				City of San Jose	101m = 0 =		
	Division, Department, or Reg	ion (if applicable)	ffice of the City Clerk	For Official Use Only				
	City Manager's Office				JUN C 8 2018			
	Designated Agency Contact	(Name,Title)			JON 5010			
	David Sykes, City Manager				Amendment (Must Pro	I vide Explanation in Part 3.)		
	Area Code/Phone Number	E-mail			LIKEJEUTED			
	(408) 535-8100 webmaster.manager@sanjoseca.gov			Date of Original Filing:	(month, day, year)			
2.	Function or Event Infor	mation						
	Does the agency have a tick	ket policy? Yes	⊠ No 🗆 🛚	Face Value of	Each Ticket/Pass \$ 500	0.00		
	Event Description: Warrior's	Game		Date(s)5		, ,		
	Event Beschption.	Provide Title/ Expla	nation					
	Ticket(s)/Pass(es) provided	by agency? Yes	□ No⊠ I	lf no: <u>Golden S</u>	State Warriors  Name of Source			
	Was ticket distribution made	at the beheet Vo-		If yes:				
	of agency official?	e at the beliest yes	□ No⊠ ¹	1 y 00	Official's Name (Last, First)			
3.	Recipients	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.						
	• Use Section A to identify the agen	cy's department or unit. •	The state of the s	identify an individ	ual. • Use Section C to identify	an outside organization.		
	A. Name of Agency, Depa	rtment or Unit	Number of Ticket(s)/ Passes	Describe the	e public purpose made pursu	ant to the agency's policy		
			3					
	B. Name of Indi	Number of Ticket(s)/	B. G.	Identify one of the foli	owing:			
	(Last, Firs	st)	Passes					
	Liccardo, Sam				onial Role <b>K</b> Other <b>C</b> ing "Ceremonial Role" or "Other" descri	Income be below:		
		2	Presentation of 2017 Championship Ring to the City of					
				San Jose	out Date Market			
	Chapman, Ahmad		1	If checki	onial Role 🗶 Other 🔲 ing "Ceremonial Role" or "Other" descri	Income be below:		
		'	Presentation San Jose	of 2017 Championship	Ring to the City of			
	Name of Outside Or	Number						
	C. Name of Outside Or (include address and		of Ticket(s)/ Passes	Describe the	public purpose made pursu	ant to the agency's policy		
						-		
١.	Verification							
	I have read and understand FPI	PC Regulations 18944.	1 and 18942.	l have verified th	nat the distribution set fortl	n above, is in accordance		
_	with the requirements.	~·	C		•	, late		
•	Signature of Agency Head	_ DAVK	3 24KE	<u> </u>	ity manager	6/8/18		
	Signature of Agency Head of Designe	e Pri	iii Name •		- Inte	(moatn, day, year)		
	Comment:							

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



Αç	gency Name								
ty	of San Jose								
	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)/	Describe the public purpose made pursuant to the agency's policy						
		Passes							
		Number							
	B. Name of Individual (Last, First)	of Ticket(s)/ Passes	Identify one of the following:						
	Boren, John (Sergeant)	1	Ceremonial Role  Other  Income  Income  If checking "Ceremonial Role" or "Other" describe below:  Presentation of 2017Championship Ring to the City of						
٠			San Jose  Ceremonial Role  Other  Income  Inco						
			Ceremonial Role  Other  Income  Income  If checking "Ceremonial Role" or "Other" describe below:						
-			Ceremonial Role  Other  Income  Income  Income  If checking "Ceremonial Role" or "Other" describe below:						
	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						
,									

	gency Report of: eremonial Role Even	nts and Ticket/F	Pass Distr	ributions	RECEIVED AP	ublic Documen
_	Agency Name			-13	Date Stamp	0 1:5
	City of San Jose			-	OTCIL	Form OUZ
	Division, Department, or Reg	ion (if applicable)		20	BAPR 27 PM 2: 32	For Official Use Only
	City Manager's Office			7.0	it tar re m	•
	<b>Designated Agency Contact</b>	(Name, Title)		The state of the s		
	David Sykes				Amendment (Must Provi	do Evolanation in Day 2 \
	Area Code/Phone Number	E-mail			Amendment (wast Provi	ue Explanation in Part 3.)
	(408) 535-8100	webmaster.manag	jer@sanjosed	ca.gov	Date of Original Filing:	(month, day, year)
2.	Function or Event Infor	mation			467	00
	Does the agency have a tic	ket policy? Yes	⊠ No 🗆 🗎	Face Value of	Each Ticket/Pass \$ 167.	ΛŃ
	Event Description: CA Wild	fire Firefighter Appre	eciation	Date(s) <u>4</u>	<u> </u>	
	Ticket(s)/Pass(es) provided	·		lf no: <u>Walt Dis</u> i	ney Company  Name of Source	
	Was ticket distribution made	a at the beheat war		f yes:	Name of Source	
	of agency official?	e at the penest Yes	LINOKI '	yoo	Official's Name (Last, First)	
3.	Recipients • Use Section A to identify the agen	acy's department or unit.	Use Section B to	identify an individ	lual. • Use Section C to identify a	nn outside organization.
	A. Name of Agency, Depa	artment or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose made pursua	nt to the agency's policy
			·			
	B. Name of Indi (Last, Fir		Number of Ticket(s)/ Passes		Identify one of the follow	wing:
	See attached list of employ	/ees	145	If check	onial Role	Income [ e below: Pay
		1		1	onial Role Other Other ing "Ceremonial Role" or "Other" describe	Income L
	C. Name of Outside Or (include address and		Number of Ticket(s)/ Passes	Describe the	e public purpose made pursuar	nt to the agency's policy
	Verification I have read and understand FPI	PC Regulations 18944	.1 and 18942.	I have verified th	hat the distribution set forth	above, is in accordance
<b>*</b>	with the requirements.	. David	SYKES	C	My Manahor	4/26/18
	Signature of Agency Heal or Designa		int Name		Title	(month, day, year)
	Comment:					

## CALIFORNIA WILDFIRE FIREFIGHTER APPRECIATION DAY - DISNEYLAND

**Qty of** 

•		Qty or
Last Name	First Name	<b>Tickets</b>
Welch	Jeff	1
Yendrey	Bennett	. 1
Barnett	David	1
Ascencio	Javier	1
Williams	Reginald	1
Laird	Gerry	1
Brown	Robert	1
Ehler	Barry	1
Crowley	Chris	1
Doss	Cleo	1
Parker	David	1
Munoz	Fernando	1
Dobson	James	1
Kerin	Jaime	1
Corona	Jesus	1
Staley	Josiah	1
Melodia	Lars	1
Maas	Michael	1
Moses	Michael	1
Chung	Patrick	1
Herrera	Robert	1
Forman	Steve	. 1
Girzhu	Alex	1
Gardanier	Andrew	1
Madison	Brian	. 1
Carlson	Clay	1
Rocha	Eddie	1
Zavattero	Joseph	1
Schriver	Kevin	1
Lomeli	Martin	1
Lawton	Matt	1
Ferrito	Michael	1
Rodrigues	Nelson	1
Levendosky	Nick	1
Engles	Ryan	1
Conroy	Cameron	1
Keegan	Casey	1
Guerrero	Joseph	1
Svendsen	Robert	1
Landi	Brian	1
		1

Keegan	Casey	1
Mun	David	1
Estrada	Greg	1
Rhodes	Jacob	1
Clausen	John	1
Conde	Marco	1
Cornelio	Marco	1
Acosta	Matt	1
Nelson	Mike	1
Salas	Moses	i
Polidoro	Pablo	1
Melikian	Patrick	1
Anderson	Richard	1
Hamilton	Scott	1
Clet	Steve	1
Nguyen	Thanh	1
Silva	Eduardo	1
Rhodes	Jacob	1
Savage	Jon	1
Nava	Joshua	1
Magnus	Max	1
Mountain	Rob	1
Summer	Arlen	1
Gutierrez	Robert	1
King	George	1
Knight	Steve	1
Smith	Joshua	1
Carrasco	Fred	1
Godoy	Ryan	1
Llosa	Alejandro	1
Mann	Jeremy	1 .
Abasolo	Joseph	1
Allread	Jesse	1 .
Bacon	Robert	1
Barmore	David	1
Beck	Anthony	1
Bell	Dennis	1
Belton	Arthur	1
Bloomgren	Timothy	1
Boxx	Gillian	1
Connolly	Tom	1
Conroy	Cameron	1
Crivello	Joe	1
Dawson	Nelson	1

Deam	Jeff	1	]
Dilloughery	Sean	1	
Endicott	Brian	1	
Ennes	David	1	-
Fabiny	Chris	1	· ·
Favorito	Joe	1	•
Fountain	Jamal	1	
Franco	Pedro	1	
Garcia	Richard	1	
Gervasoni	Bret	1	
Golder	Michael	1	
Gordon	Stefanos	1	
Gowdy	Darren	1	
Haag	Timothy	1	
Jacobs	Angela	1	
Kelly	Matthew	1	-
King	Anthony	1	
Lucchesi	Mario	1	,
Marks	Brian	1	
McVeigh	Brandon	1	
Meeks	Melvin	1	
Melandrino	David	1	
Mendoza	James	1	
Moraida	Michael	. 1	
Morales	Gilbert	. 1	
Nguyen	Steven	1	
Ochoa	Alonso	1	
Olmos .	Dave	1 _	
Padron	Joshua	1	
Parmer .	Derek	1	
Pavloff	John	1	
Peuler	Christopher	1	
Pianto	Anthony	1	
Pierce	William	1	
Ramirez	Thomas	1	
Rector	Daniel	1	
Rhodes	Jacob	1	
Rodriguez	Nelson	1	
Ryan	Francis	1	•
San Miguel	Shawn	1 '	
Schulte	James	1	
Shea	Rayan	1	
Taylor	Kwamin	1	
Thornton	William	1	

Tovar	Oscar	1
Trevino	Ray	1
Tuyor	Gregory	1
Veitch	David	1
Valasquez	Eliel	1
Valasquez	Victor	1
Vo	Thang	1
Wallace	Darren	1
Wescott	Erick	1
Wheeler	Dennis	1
Wong	Mark	1
Young	James	1
Cordero	Evelyn	1
Jimenez	Claudia	1
Villanueva	Alyssa	1
Figueroa	Mariela	1
Fritz	Maryann	1

	gency Report of: eremonial Role Even	its and Ticket/F	Pass Distri	butions	ME CEIVEE	A Public	Document
1.	Agency Name			ŷ d	Date Stamp		rnia 802
	City of San Jose				OTC NN		
	Division, Department, or Reg	ion (if applicable)		2018	MAR 28 PM 1:	51 For O	fficial Use Only
	City Manager's Office	÷					
	Designated Agency Contact	(Name, Title)			1		
	David Sykes, City Manager				D Amondmont (14	15: 11 5:1	" · D (0)
	Area Code/Phone Number	E-mail			Amendment (Mu	ist Provide Explana	tion in Part 3.)
	(408) 535-8100	webmaster.manag	er@sanjoseca	a.gov	Date of Original Filin	ng:(month, da	y, year)
2.	Function or Event Infor	mation				100.00	
	Does the agency have a tic	ket policy? Yes	⊠ No□ F	ace Value of	Each Ticket/Pass \$	100.00	
	Event Description: 10th Ann	nual CPAA Spring G	ala D	Pate(s)3	<u>, 3 , 18</u>	/	
	Ticket(s)/Pass(es) provided	•		no: Chinese	Performing Arts of A	America (CP <i>I</i>	\A)
	Was ticket distribution made of agency official?	e at the behest Yes	□ No⊠ <sup>If</sup>	yes:	Official's Name (Last, Fir	rst)	
3.	Recipients • Use Section A to identify the ager	cy's department or unit. •	Use Section B to i	dentify an individ	ual. • Use Section C to id	lentify an outside	organization.
	A. Name of Agency, Depart	artment or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose made ¡	pursuant to the a	gency's policy
	B. Name of Indi		Number of Ticket(s)/ Passes		Identify one of th	ne following:	
	Diep, Lan  Moua, Louansee		2	Ceremonial Role  Other  Income  If checking "Ceremonial Role" or "Other" describe below:  Event Guest  Ceremonial Role  Other  Income  If checking "Ceremonial Role" or "Other" describe below:  Event Guest			Income [
			2				Income
	C. Name of Outside O	rganization description)	Number of Ticket(s)/ Passes	Describe the	e public purpose made p	oursuant to the a	gency's policy
	<b>Verification</b> I have read and understand FP with the requirements.	PC Regulations 18944	.1 and 18942. I	have verified th	hat the distribution set	t forth above, is	s in accordance
	D-DSyl	_ Davis	o Sykes	<u>ت                                    </u>	TY MANAGOR	<u> </u>	3/27/18
	Signature of Agency Head or Design	ee Pr	int Name 🖣		Title		month, day, year)
	Comment:						

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



	gency Name		
	Recipients  • Use Section A to identify the agency's department or unit.	Use Section B to id	lentify 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
		Number	
	B. Name of Individual (Last, First)	of Ticket(s)/ Passes	Identify one of the following:
	Fong, Mason	1	Ceremonial Role Other . Income Income If checking "Ceremonial Role" or "Other" describe below:  Event Guest
	Ponciano, Frank	2	Ceremonial Role Other Image Income In
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:
	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
			'

Department, or Region (if applicable) ager's Budget Office ad Agency Contact (Name, Title) non, Assistant Budget Director BiPhone Number B144	Division, Department, or Region (if applicable)  City Manager's Budget Office  Designated Agency Contact (Name, Title)  Jim Shannon, Assistant Budget Director  Area Code/Phone Number   E-mail	C	eremonial Role Ever	nts and Ticket/	Pass Distr	ibutions	PECSIVIA Public Docu	ment
Department, or Region (if applicable)   ager's Budget Office   dagency Contact (Name, Title)	Division, Department, or Region (if applicable)  City Manager's Budget Office  Designated Agency Contact (Name, Title)  Jim Shannon, Assistant Budget Director  Area Code/Phone Number   E-mail	1.	Agency Name			-	Date Stamp   California	202
ager's Budget Office d Agency Contact (Name, Title) non, Assistant Budget Director    Amendment (Naus Provide Explanation in Part 3.)   Date of Original Filling:	City Manager's Budget Office  Designated Agency Contact (Name, Title)  Jim Shannon, Assistant Budget Director  Area Code/Phone Number   E-mail   jim.shannon@sanjoseca.gov   Date of Original Filing:		City of San José					
Agency Contact (Name, Title)   non, Assistant Budget Director	Designated Agency Contact (Name, Title)  Jim Shannon, Assistant Budget Director  Area Code/Phone Number   E-mail   Jim.shannon@sanjoseca.gov   Date of Original Filing:		Division, Department, or Reg	gion (if applicable)		99	2818 MAR -8 AM 9: 28	Only
Amendment (Must Provide Explanation in Part 3.)   Date of Original Filling:   (month, day, year)	Jim Shannon, Assistant Budget Director  Area Code/Phone Number 408 535 8144  Jim.shannon@sanjoseca.gov  Date of Original Filling:  Jim.shannon@sanjoseca.gov  Date of Original Filling:  (month, day, year)  Date of Original Filling: (month, day, year)  Date of Original Filling: (month, day, year)  Date of Original Filling: (month, day, year)  Date of Original Filling: (month, day, year)  Date of Original Filling: (month, day, year)  Date of Original Filling: (month, day, year)  Date of Original Filling: (month, day, year)  Date of Original Filling: (month, day, year)  Date of Original Filling: (month, day, year)  Date of Original Filling: (month, day, year)  Date of Original Filling: (month, day, year)  Date of Original Filling: (month, day, year)  Date of Original Filling: (month, day, year)  Date of Original Filling: (month, day, year)  Date of Original Filling: (month, day, year)  Date of Original Fillin		City Manager's Budget Offi	ice			2010 HAIN O HIT 2 CO	
Amendment (Must Provide Explanation in Part 3)   Date of Original Filing:	Area Code/Phone Number		Designated Agency Contact	(Name, Title)			1 1	
Date of Original Filing:	Area Code/Phone Number 408 535 8144   jim.shannon@sanjoseca.gov   Date of Original Filing:		Jim Shannon, Assistant Bu	dget Director			Amandment (Mark Barida Santratia in Ba	401
n or Event Information agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ \$6 - 2.2 \in scription: Sharks Game	2. Function or Event Information  Does the agency have a ticket policy? Yes \( \) No \( \) Face Value of Each Ticket/Pass \( \) \( \) 86 \( - 2.2 \) Event Description: \( \) Sharks Game \( \) Provide Title/ Explanation  Ticket(s)/Pass(es) provided by agency? Yes \( \) No \( \) If no: \( \) Name of Source  Was ticket distribution made at the behest 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 of Ticket(s)/Passes  B. Name of Individual (Last, First) Describe the public purpose made pursuant to the agency's policy Passes  See attached list of attendees  A. Name of Outside Organization of Ticket(s)/ Staff recognition  C. Name of Outside Organization of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy income if the checking "Genemonial Role" or "Other" describe below:  C. Name of Outside Organization of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy policy of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy policy income in the public purpose made pursuant to the agency's policy of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy policy income in the public purpose made pursuant to the agency's policy policy income in the public purpose made pursuant to the agency's policy policy income in the public purpose made pursuant to the agency's policy policy income in the public purpose made pursuant to the agency's policy policy income in the public purpose made pursuant to the agency's policy policy income in the public purpose made pursuant to the agency's policy policy income in the public purpose made pursuant to the agency's policy income income in the public purpose made pursuant to the agency's policy income income in the public purpose in the public purpose in the public purpose in t		Area Code/Phone Number	E-mail			Amendment (Must Provide Explanation in Pal	7 3.)
Agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ \$ 86 - 2.2 \$    Sharks Game	Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ \$ 6 - 2.2 \$ Event Description: Sharks Game Date(s) 2 / 15 / 18 /		408 535 8144	jim.shannon@sar	njoseca.gov		Date of Original Filing:	-
Pass(es) provided by agency? Yes \ No \ If no:	Event Description: Sharks Game	2.	Function or Event Info	rmation				
Pass(es) provided by agency? Yes \( \) No \( \) If no:    Name of Source	Event Description: Sharks Game		Does the agency have a tic	ket policy? Yes	IN No II	Face Value of	Each Ticket/Pass \$ 86 - 225	
Pass(es) provided by agency? Yes No If no:    Name of Source	Ticket(s)/Pass(es) provided by agency? Yes No If no:    Name of Source		(AT)	A 5-4 12:000				
Pass(es) provided by agency? Yes No I If no:	Ticket(s)/Pass(es) provided by agency? Yes \ No \ If no:		Event Description: Strange	Provide Title/ Exp	lanation	Date(s)	<u> </u>	
If yes:  Official?  Of	Was ticket distribution made at the behest Yes  No  fagency official?  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.  Number of Ticket(s)/ Passes  B. Name of Individual (Last, First)  Number of Ticket(s)/ Passes  See attached list of attendees    Number of Ticket(s)/ Passes   Identify one of the following:		Ticket(s)/Pass(es) provided		Mo∏ I	If no:		
Position A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.  Name of Agency, Department or Unit    Number of Ticket(s)/Passes   Describe the public purpose made pursuant to the agency's policy	of agency official?  3. Recipients  • Use Section A to identify the agency's department or unit.  A. Name of Agency, Department or Unit  B. Name of Individual (Last, First)  B. Name of Individual (Last, First)  See attached list of attendees  1. See attached list of attendees  24 Staff recognition  C. Name of Outside Organization  Number of Ticket(s)/ Passes  C. Name of Outside Organization  Number of Ticket(s)/ Passes  Describe the public purpose made pursuant to the agency's policy  Identify one of the following:  Ceremonial Role   Other   Income  If checking "Ceremonial Role" or "Other describe below:  C. Name of Outside Organization  On the public purpose made pursuant to the agency's policy  Describe the public purpose made pursuant to the agency's policy  On the public purpose made pursuant to the agency's policy  On the public purpose made pursuant to the agency's policy  On the public purpose made pursuant to the agency's policy  On the public purpose made pursuant to the agency's policy  On the public purpose made pursuant to the agency's policy  On the public purpose made pursuant to the agency's policy  On the public purpose made pursuant to the agency's policy  On the public purpose made pursuant to the agency's policy  On the public purpose made pursuant to the agency's policy				шо ш		Name of Source	
Ponts  on A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.  Name of Agency, Department or Unit    Number of Ticket(s)/ Passes	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  B. Name of Individual (Last, First)  B. Name of Individual (Last, First)  See attached list of attendees  Ceremonial Role Other Income If Checking Ceremonial Role Other Income			e at the behest Yes	□ No⊠ □	f yes:	Official's Name (Last First)	
Name of Individual (Last, First)  Ched list of attendees  Name of Outside Organization  Name of Outside Organization  Number of Ticket(s)/ Passes  Ceremonial Role  Other  Income  Income  If checking "Ceremonial Role" or "Other" describe below:  Name of Outside Organization (Income of Ticket(s)/ Passes  Passes  Number of Ticket(s)/ Passes  Passes  Number of Outside Organization (Income of Ticket(s)/ Passes	* 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 of Ticket(s)/ Passes    Describe the public purpose made pursuant to the agency's policy passes    Describe the public purpose made pursuant to the agency's policy passes    Describe the public purpose made pursuant to the agency's policy passes    Describe the public purpose made pursuant to the agency's policy passes    Describe the public purpose made pursuant to the agency's policy passes    Describe the public purpose made pursuant to the agency's policy passes    Describe the public purpose made pursuant to the agency's policy passes   Describe the public purpose made pursuant to the agency's policy passes		of agency official?				5.101a. 5.11a.115 (2.115)	
Name of Individual (Last, First)  Ched list of attendees  Number 24  Name of Outside Organization  Number 24  Name of Outside Organization  Number 35  Ceremonial Role	* 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 of Ticket(s)/ Passes    Describe the public purpose made pursuant to the agency's policy passes    Describe the public purpose made pursuant to the agency's policy passes    Describe the public purpose made pursuant to the agency's policy passes    Describe the public purpose made pursuant to the agency's policy passes    Describe the public purpose made pursuant to the agency's policy passes    Describe the public purpose made pursuant to the agency's policy passes    Describe the public purpose made pursuant to the agency's policy passes   Describe the public purpose made pursuant to the agency's policy passes	3	Recipients					
Name of Agency, Department or Unit    Number of Ticket(s)/ Passes   Describe the public purpose made pursuant to the agency's policy	A. Name of Agency, Department or Unit    Number of Ticket(s)/ Passes   Describe the public purpose made pursuant to the agency's policy	٥.		ncv's department or unit.	• Use Section B to	identify an indivi	dual. • Use Section C to identify an outside organiza	tion.
Name of Individual (Last, First)  Ched list of attendees  Ceremonial Role  Ceremonial Role  Ceremonial Role  Ceremonial Role  Ceremonial Role  Other  Staff recognition  Ceremonial Role  Other  Income  If checking "Ceremonial Role" or "Other" describe below:  Name of Outside Organization  Number of Ticket(s)/  Obscribe 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:    See attached list of attendees   Ceremonial Role   Other   Income   If checking "Ceremonial Role" or "Other" describe below:   Staff recognition   Ceremonial Role   Other   Income   Income   If checking "Ceremonial Role" or "Other" describe below:   Ceremonial Role   Other   Income   Income   Income   If checking "Ceremonial Role" or "Other" describe below:   Ceremonial Role   Other   Income							
Name of Individual (Last, First)  Ched list of attendees  24  Ceremonial Role Other Staff recognition  Ceremonial Role Other Income  Ceremonial Role Other Income  If checking "Ceremonial Role" or "Other" describe below:  Ceremonial Role Other Income  If checking "Ceremonial Role" or "Other" describe below:  Name of Outside Organization  Number of Ticket(s)/  Describe the public purpose made pursuant to the agency's policy	B. Name of Individual (Last, First)  See attached list of attendees  24  Ceremonial Role Other Image: Income If checking "Ceremonial Role" or "Other" describe below:  Ceremonial Role Other Image: Income If checking "Ceremonial Role" or "Other" describe below:  Ceremonial Role Other Image: Income If checking "Ceremonial Role" or "Other" describe below:  C. Name of Outside Organization of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy		A. Name of Agency, Dep	partment or Unit		Describe th	ne public purpose made pursuant to the agency's	policy
Name of Individual (Last, First)  Ched list of attendees  Ceremonial Role  Other  Income  Staff recognition  Ceremonial Role  Other  Other   Income  I	B. Name of Individual (Last, First) of Ticket(s)/ Passes    Ceremonial Role   Other   Income   Income		and the second s	VALUE OF THE PARTY	1		*	0
Name of Individual (Last, First)  ched list of attendees  ched list of attende	B. Name of Individual (Last, First) of Ticket(s)/ Passes    Ceremonial Role   Other   Income   Income				8			
Name of Individual (Last, First)  ched list of attendees  ched list of attende	B. Name of Individual (Last, First) of Ticket(s)/ Passes    Ceremonial Role   Other   Income   Income							
Name of Individual (Last, First)  ched list of attendees  ched list of attende	B. Name of Individual (Last, First) of Ticket(s)/ Passes    Ceremonial Role   Other   Income   Income							
Ceremonial Role Other Income  Ceremonial Role Other Income  Staff recognition  Ceremonial Role Other Income  Ceremonial Role Other Income  Income  Staff recognition  Ceremonial Role Other Income  In	See attached list of attendees  Ceremonial Role Other Image: Income If checking "Ceremonial Role" or "Other" describe below:  Staff recognition  Ceremonial Role Other Image: Income If checking "Ceremonial Role" or "Other" describe below:  Ceremonial Role Other Image: Income If checking "Ceremonial Role" or "Other" describe below:  C. Name of Outside Organization of Ticket(s)/ Other Of Ticket(s)/ Other Image: Income Image: Image: Income Image: Image: Income Image: Income Image: Income Image: Income Image: Image: Income Image: Income Image: Income Image: Income Image: Income Image: Income Image: Image: Income Image: Image: Income Image: Ima		R Name of Ind	lividual			Identify one of the following:	
Staff recognition	24    If checking "Ceremonial Role" or "Other" describe below:   Staff recognition							
24   Staff recognition   Staff recognition	24 Staff recognition  Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:  Staff recognition  Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:  Number of Ticket(s)/ Other describe below:  Describe the public purpose made pursuant to the agency's policy		See attached list of attend	lees				ncome [
Ceremonial Role Other Income  If checking "Ceremonial Role" or "Other" describe below:  Name of Outside Organization (Include address and description)  Outside Organization (Include address and description)	Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:  Name of Outside Organization Of Ticket(s)/ OF Ticket(s)				24			
Name of Outside Organization  (Include address and description)  Number of Ticket(s)/	If checking "Ceremonial Role" or "Other" describe below:  Name of Outside Organization  Of Ticket(s)/  Of Ticket(s)/  Describe the public purpose made pursuant to the agency's policy		1					
Name of Outside Organization  Number of Ticket(s)/  Opening address and description  Number of Ticket(s)/  Describe the public purpose made pursuant to the agency's policy	C. Name of Outside Organization Number of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy					100000000000000000000000000000000000000	78 (18 18 18 18 18 18 18 18 18 18 18 18 18 1	ncome [
Name of Outside Organization of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy	C. Name of Outside Organization of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy					If chec	king "Ceremonial Role" or "Other" describe below:	
Name of Outside Organization of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy	C. Name of Outside Organization of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy			- P			- K	
(include addrage and description)					THE RESIDENCE THE PROPERTY OF THE PERSON OF	Describe th	e public purpose made pursuant to the agency's	policy
			(include address and	d description)				
					*			
								-
					5	-		
5							*	
					of Ticket(s)/	If chec.	king "Ceremonial Role" or "Other" describe below:	
					6	-		
		1	Verification				=	
on.	1 Varification			DDC Bogulations 1904	4 1 and 19042	I have verified	that the distribution set forth above is in see	ordono
				1 O Negulations 1094	T. I AIIU 10942.	i nave venileu l	nat the distribution set forth above, is ill acce	nuarice
and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance	I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance	-	7.0C.1	Desir	<		- 100 210	1.0
and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance		-	12 12 29C	- THAM	24KK2	<u>e</u>	TY MANAGER 3/6	118
and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordanguirements.  Davio Sykes erry manager 3/6/1	with the requirements.  DEVIOSYLES CITYMANAGER 3/6/1		Signature of Agency Head dr Design	nee F	Print Name		Title (month, da	y, yea

Agency Report of:

#### Budget Office Staff, Sharks Game - Thursday, February 15, 2018

24 Tickets

Jim Shannon

Margaret McCahan + Guest

**Chris Petak** 

Jonathan Paul

David Lisenbee + Guest

Nicole Altamirano

Selena Ubando + Guest

Jaideep Shergill + Guest

Alice Vurich + Guest

Enrique De Anda + Guest

Kristie Resendez + Guest

Jennifer McGuire

Adrian Liu + Guest

Mario Rosas + Guest

Bill Gold, OER

<del>1</del> .				tributions	A to bear the long of The long land	<b>Public Document</b>
• •	Agency Name			San	OSO Date Stamp	California 802
	City of San Jose				OTUP	Form OUZ
	Division, Department, or Reg	ion (if applicable)		2010 .	AM 18 AM 9:07	For Official Use Only
	City Manager's Office of Eco	onomic Developmen	t			
	Designated Agency Contact	(Name, Title)				
	Jeff Ruster, Assistant Direct	tor			Amendment (Must P.	rovide Explanation in Part 3.)
	Area Code/Phone Number	E-mail			James (************************************	·
	(408) 535-8100	webmaster.manag	er@sanjose	eca.gov	Date of Original Filing: .	(month, day, year)
2.	Function or Event Infor	mation			0.6	005
	Does the agency have a tick	ket policy? Yes [	⊠ No 🗆	Face Value of	Each Ticket/Pass \$	5 - 225
	Event Description: Sharks v	rs. Wild		Date(s) 12	<u>/ 10 / 17</u>	
		Provide Title/ Explai				
	Ticket(s)/Pass(es) provided	by agency? Yes	X No □	If no:	Name of Source	
	Was ticket distribution made	e at the behest Yes		If yes:	Official's Name (Last, First)	
	of agency official?				Official's Name (Last, First)	
	A. Name of Agency, Depa	artment or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose made purs	suant to the agency's policy
	B. Name of Indi		Number of Ticket(s)/ Passes		Identify one of the fo	i Illowing:
			rasses	Cerem	onial Role  Other	Income [
	See attached list of attende	ees	24	If check	ing "Ceremonial Role" or "Other" des nental Relations netwo	
			,		onial Role Other Xing "Ceremonial Role" or "Other" des	_
	C. Name of Outside Or (include address and		Number of Ticket(s)/ Passes	Describe the	e public purpose made purs	uant to the agency's policy
	Verification					
	I have read and understand FPI with the requirements.	PC Regulations 18944.	1 and 18942	t. I have verified t	nat the distribution set fo	rtn above, is in accordance
	$\sim$ $\sim$ 1	_		_		2 1/ 2/ 2
_	DIV	DAVID S	A N D	<u> </u>	TY MANAG	שוומווי שם

### SHARKS VS. WILD GAME

### Sunday, December 10, 2017

LAST NAME	<u>FIRST NAME</u>	<b>QTY OF TICKETS</b>
Moore	Pam	2
Amador	Rose	2
Garcia	Rebecca	2
Koepp-Baker	Susan	2
Parmeter	Brynt	2
Seavers	Derrick	2
Ruster	Jeff	2
Flynn	Joe	2
Bas	Jake	1
Burrill	Jeff	2
Linares	Nicolas	1
Holguin	Ingrid	2
Batra	Rajiv	2

**Ceremonial Role Events and Ticket/Pass Distributions** RECEIVED A Public Document Date Stamp California 1. Agency Name OTCK **Form** City of San Jose For Official Use Only 7017 NOV 21 AM 9:07 Division, Department, or Region (if applicable) City Manager's Office Designated Agency Contact (Name, Title) David Sykes, City Manager Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number Date of Original Filing: (408) 535-8100 webmaster.manager@sanjoseca.gov (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ Does the agency have a ticket policy? Yes ⊠ No □ Event Description: Flood Recovery Appreciation Dinner Date(s) \_\_10\_\_/\_ 29 / Provide Title/ Explanation Mr. Kieu Hoang Ticket(s)/Pass(es) provided by agency? Yes ☐ No 🗵 Name of Source Was ticket distribution made at the behest Yes ☐ No ☒ If yes: \_ 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 Describe the public purpose made pursuant to the agency's policy Α. of Ticket(s)/ **Passes** Number Name of Individual B. Identify one of the following: of Ticket(s)/ (Last, First) Passes Ceremonial Role Other X Income See Attached List of Employees If checking "Ceremonial Role" or "Other" describe below: 113 Flood Recovery Volunteer Appreciation Dinner Ceremonial Role Other  $\square$ Income If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization Describe the public purpose made pursuant to the agency's policy C. of Ticket(s)/ (include address and description) Passes 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 DAVIO SYKES

Agency Report of:

## Flood Recovery Volunteer Appreciation Dinner October 29, 2017

LAST NAME	FIRST NAME	Oty of Tickets
Liccardo	Sam	2
Russo	Khanh	1
Pereira	Paul	1
Le	Candace	1
Trujillo	Ted	1
Peralez	Raul	2
Lan	Diep	1
Dang	Thulien	1
Nguyen	Tam	2
Connolly	Shane Patrick	1
Pruyn	Evan	1
Alvarez	Sal	1
Amores	Michelle	1
Avila	Mari	1
Bailey	Aurelia	1
Bartholdy	Joanne	1.
Beretta	Vanessa	1
Bittner	Jim	1
Bolli	Michael	1
Bopf	Dave	1
Bourne	Jill	1
Brasil	Steven	1
Burnham	Nicolle	1
Bybee	Debbie	1
Cajina	Greg	1
Camara	Otto	1
Camarena	Carolina	1
Canjara	Israel	1
Cano	Matt	1
Cannon	Patty	. 1
Carrigan	Ryan	1
De Anda	Enrique	1
Do	Tu	1
Doan	Bied	1
Dominguez	Marta	1
Dong	Tiffany	1
Du	Michelle	1
Du	Cynthia	1
Fong	Jocelyn	1

Gannon	Lisa	1
Garcia	Joe	1
Garcia	Clarissa	1
Harkness	Kip	1
Harris	Steve	1
Hartwick	David	1
Heisenger	Patrick	1 .
Hemphill	Kelly	1
Huerta	José	1
Hughey	Rosalynn	1
Khuu	Tommy	1
Kinsman	Mellory	1
Kredel	Astra	1
Kroll	Kelly	1
	Alan	1
Ky	Amanda	1
Ky Le	Hanh	1
Le	Jennifer	1
		1
Le Lee	Cuong Jeff	1
Lin		
	Walter	1
Lloyd	Rob	1
Macias	Nancy	1
MacKenzie	Cay Denise	1
Maguire	Jennifer	1
Malloy	Maria	1
Martinez	Mona	1
Mayne	Bill	1
Mesa	David	1
Milowicki	Diane	1
Montejano	Luz	1
Morales-Ferrand	Jacky	1
Morrish	Rheanna	11
Mota	Esther	1
Moua	Louansee	1
Murphy	Tony	1
Muser	Mark	1
Nair	Rajani	1
Negrete	Lorena	1
Nguyen	Anh	1
Nguyen-Perez	Thanh	1
O'Meara	Mary	1
Perez	Raul	1
Pham	Nguyen	1

Ramirez	Richard	1
Rapson	Rodney	1
Riordan	Ray	1.
Rios	Cecilia	1
Ristow	John	1
Rivadeneyra	Alana	1
Rosales	Bernie	1
Shoffner	Jeremy	1
Swartout	Chris	1
Sykes	David	1
Tabaldo	Rita	1
Taber	Toni	1
Terwillinger	Greg	1
Tovar	Vince	1
Tran	Candace	1.
Tran	Theresa	1
Tran	Anh	1
Truong	Hoang	1
Tucker	Daniel	1
Vanderveen	Rachel	1
Vu	Hoang	1
Walesh	Kim	1
Wells	Laura	1
Wessling	Cheryl	1
Wilcox	Leland	1
Will	Mike	1
Williams	Olympia	1
Ziemba	Kate	1

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

A Public Document

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1.	Agency Name			_	RE()E  <b>Date</b>  Stamp	California RO2
	City of San Jose			San	Jose City Clerk	Form OUZ
	Division, Department, or Reg	ion (if applicable)			]	For Official Use Only
	City Manager's Office				B-7 PM 3:57	
	<b>Designated Agency Contact</b>	(Name, Title)			TRW OTC	
	Norberto Duenas, City Mana	ager				Provide Explanation in Part 3.)
	Area Code/Phone Number	E-mail			Americanient (mass	Frovide Explanation in Fait 5.)
	(408) 535-8100	webmaster.manag	er@sanjosed	ca.gov	Date of Original Filing:	:(month, day, year)
2.	Function or Event Infor	mation				
	Does the agency have a ticl	ket policy?	⊠ No□ ¹	Face Value of	Each Ticket/Pass \$ 1	65.50
						7
	Event Description: Harlem (	Provide Title/ Expla	nation	Date(s)	<u>, 20 , 17 </u>	
	Ticket(s)/Pass(es) provided			f no:		
	( ) ( )	, , , , , , , , , , , , , , , , , , , ,			Name of Source	
	Was ticket distribution made	at the behest Yes	□ No⊠ <sup>I</sup>	f yes:	Official's Name (Last, First)	3
	of agency official?				omorar o rvanno (Euot, 1 mot)	
3.	Recipients	•				
J.	• Use Section A to identify the agen	cv's department or unit.	Use Section B to	identify an individ	lual. • Use Section C to ider	ntify an outside organization.
			Number			
	A. Name of Agency, Depa	ırtment or Unit	of Ticket(s)/ Passes	Describe th	e public purpose made pu	irsuant to the agency's policy
		****				
					,	
				-		
			Number			
	B. Name of Indi		of Ticket(s)/ Passes		Identify one of the	following:
	Marial Maria			Cerem	nonial Role  Other  Other	Income □
	Maciel, Mario		1	If check	king "Ceremonial Role" or "Other" de	escribe below:
					duras leaders from di onal City Manager's A	ifferent cities as a part of
	Caniuma Janaal				nonial Role  Other	
	Canjura, Isreal		1	If check	king "Ceremonial Role" or "Other" de	escribe below:
			·			fferent cities as a part of
	N		Number		onal City Manager's A	
	C. Name of Outside Or (include address and	· · · · · · · · · · · · · · · · · · ·	of Ticket(s)/ Passes	Describe the	e public purpose made pur	rsuant to the agency's policy
	International City Manager	la Association	1 40000	Hosting Hon	durae laadare (Mayor	rs, Councilmembers &
	International City Manager (ICMA) Honduras Delegat		22			es that are a part of ICMA
	(1011) () Horizana Borogan			, ,	,	
,	Marification		<u> </u>			
	Verification ( )	DO D	4 140040			
	I have read and understand FPI with the regarements.	<sup>2</sup> C Regulations 18944.	.1 and 18942.	i have verified ti	hat the distribution set to	orth above, is in accordance
	MIMI	Militarian magazine Cara Angazine proprieto (	, ,			2/2/2
	Signature of Agency Head or Designe	16-bert	<u>ວ Dueກັ</u> int Name	ias <u>Cr</u>	ty manager	month How your
	Signature of Agency Head of Designit	FI			iue ♥	wnonin, pay, year)
	Comment:					

Agency Report of:

	·	1				
eren	nonia	I Role	Events a	and Ticket/F	Pass Distr	ibutions

**A Public Document** 

. Agency Name			.44.	RE( Date Stamp	California 802
City of San Jose			Ü0	r Jose City Clerk	Form For Official Use Only
Division, Department, or Region	on (if applicable)		*017	mma if all l. oo	Por Official Use Offiy
City Manager's Office			2016	DEC 15 PM 4:09	
Designated Agency Contact (A				SP OTC	
Norberto Duenas, City Manag				Amendment (Must Pro	ovide Explanation in Part 3.)
Area Code/Phone Number	E-mail				
(408) 535-8111	webmaster.manag	er@sanjosed	a.gov	Date of Original Filing: _	(month, day, year)
2. Function or Event Inform	nation				
Does the agency have a ticke	et policy? Yes	⊠ No □ F	ace Value of	Each Ticket/Pass \$ 89	.00 - \$222.00
Event Description: Sharks vs	. Coyote	Г	Date(s) 11	<u>, 29 , 16</u>	1 1
Event Description.	Provide Title/ Expla	nation	Jaic(3)	·	
Ticket(s)/Pass(es) provided b	y agency? Yes	⊠ No 🗆 🗆	f no:	Name of Source	
Man tiplest distribution made	at the behadt at		f yes:		•
Was ticket distribution made of agency official?	at the benest Yes	∐ No⊠ '	ı yes	Official's Name (Last, First)	
or agency official:	7				
. Recipients					
• Use Section A to identify the agency	's department or unit. •	Use Section B to	identify an individ	lual. • Use Section C to identif	y an outside organization.
A. Name of Agency, Depart	tment or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose made purs	uant to the agency's policy
City Manager's Leadership (see attached list)	12		Opportunity for City Ma JSU President & Cabin		
B. Name of Indivi		Number of Ticket(s)/ Passes		Identify one of the fo	lowing:
			1	nonial Role  Other  Oth	Income C
				nonial Role Other of "Other" descriptions of the control of the co	Income C
C. Name of Outside Org		Number of Ticket(s)/ Passes	Describe the	the public purpose made pursuant to the agency's p	
San Jose State University (s One Washington Square	ee attached list)	12		Opportunity for City Mar JSU President & Cabin	
. Verification	C Regulations 18944	.1 and 18942.	I have verified to	hat the distribution set for	th above, is in accordanc

#### Sharks vs. Coyotes - November 29, 2016

#### City of San José Attendees

<u>Last Name</u>	<u>First Name</u>	<u>Title/Department</u>
Liccardo	Sam	Mayor
Duenas	Norberto	City Manager
Sykes	Dave	Assistant City Manager
Maguire	Jennifer	Sr. Deputy City Manager
Walesh	Kim	Deputy City Manager
Harkness	Kip	Deputy City Manager
Edmonds-Mares	Julie	Deputy City Manager
Vossbrink	David	Communications Director
Jacobson	Curtis	Fire Chief
Trujillo	Ted	Mayor's Office
Schmanek	Gloria	City Manager's Office

#### San José State University Attendees

Last Name	<u>First Name</u>	<u>Title</u>
Papazian	Mary	President
Lanning	Paul	Vice President
Shiller	Barry	Associate Vice President
Elliott	Tracy	Dean, University Library
Vollendorf	Lisa	Dean
Bailey	Jaye	Vice President
Kimbarow	Michael	Professor
Faas	Charlie	Vice President & CFO
Wong (Lau)	Kathleen	Chief Diversity Officer

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name ₹E()E|Date Stamp California **Form** San ose City Clerk City of San Jose For Official Use Only Division, Department, or Region (if applicable) 2016 NOV 10 PM 3: 53 City Manager's Office **Designated Agency Contact** (Name, Title) OTO Norberto Duenas, City Manager Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number Date of Original Filing: (408) 535-8100 webmaster.manager@sanjoseca.gov (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 175.00 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: Warriors Community Mix & Mingle Provide Title/Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ No □ If no: Name of Source Was ticket distribution made at the behest Yes ☐ No ☒ If yes: \_ 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 Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit of Ticket(s)/ Α. **Passes** Number Name of Individual Identify one of the following: of Ticket(s)/ (Last, First) Passes Ceremonial Role Other X Income See attached list If checking "Ceremonial Role" or "Other" describe below: 22 Community Mix and Mingle featuring the Math Hoops Program Ceremonial Role Other  $\Box$ Income If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization Describe the public purpose made pursuant to the agency's policy C. of Ticket(s)/ (include address and description) Passes 4. Verification

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 Flead or Designee

Print Name

Title

(month, day, year)

## Warriors Community Mixer/Game October 6, 2016

Last Name	First Name	Qty of Tickets
Liccardo	Sam	1
Peralez	Raul	2
Sykes	Dave	2
Trujillo	Ted	1
Russo	Khanh	2
Howard	Barb	2
Holguin	Ingrid	2
Gonzalez	Dora	1
Healy	Time	1
Shih	Stacey	1
Bhudsabourg	Roseryn	1
Rodriguez	Johanna	1
Moua	Louansee	1
Marcoida	Christine	2
Seagraves	Chelsey	1
Garcia	Diane	1

**Agency Report of:** Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California Jose City Clark Form City of San Jose For Official Use Only Division, Department, or Region (if applicable) 2016 OCT 11 PM 2: 13 City Manager's Office Designated Agency Contact (Name, Title) Norberto Duenas, City Manager ☐ Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number Date of Original Filing: (408) 535-8100 webmaster.manager@sanjoseca.gov (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$  $\frac{20.00}{}$ Does the agency have a ticket policy? Yes⊠ No□ Event Description: SJSU/Portland State Football Game Date(s) 9 / 10 / Provide Title/Explanation Ticket(s)/Pass(es) provided by agency? Yes⊠ No 🗆 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 Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit of Ticket(s)/ Passes City of San Jose City of San Jose Employee Appreciation Day 89 Number Name of Individual В. Identify one of the following: of Ticket(s)/ (Last, First) Passes Ceremonial Role Other 🗵 Income See attached list of employees If checking "Ceremonial Role" or "Other" describe below: City of San Jose Employee Appreciation Day Other  $\square$ Ceremonial Role Income If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization Describe the public purpose made pursuant to the agency's policy C. of Ticket(s)/ (include address and description) **Passes** N/A Verification I have read and understand EPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements Norberto Dueñas Col

## CSJ Employee Appreciation Event - 9/10/16 Football Game Spartan vs. Portland

Last Name	First Name	Qty of Tickets
Albayalde	Joseph	2
Aldridge	Jason	2
Alexander	Linda	2
Avalos	José	2
Barmore	David	2
Birhanemeskel	Yonas	2
Bittner	Jim	2
Brooks	Ed	2
Brown	Michael	2
Buchanan	Robert	1
Capurso	Gina	. 2
Carrigan	Ryan	2
Chen	Genhan	2
Coleman	Jay	2
De Castro	Fidel	2
Dwyer	George	2
Formico	Paul	2
Fournier	David	2
Garcia	Alma	2
Garcia	Arturo	2
Giovannetti	Mark	2
Goodwin	Melody	2
Kane	Anthony	2
Lipari	Mark	2
Lozano	Robert	2
Mack	Karen	2
Martinez	Bianca	2
Mehta	Smita	2
Moody	Doug	2
Mora	Rebecca	2
Morin	Rita	2
Nieves	Gerardo	2
O'Dea	Kyle	2
Ojigho	Kristi	2
Peralez	Raul	2
Rangel	Charles	2
Rodriguez	Max	2
Saavedra	Joshua	
Sabatelli	Gordana	2 2
Shelton	Matt	2
Smith	Todd	2
Sonora	Patricia	2
Walters	Katherine	2
Wright	Kenney	2
Yang	Yannina	2

**Ceremonial Role Events and Ticket/Pass Distributions** A Public Document San Jose City Cler 1. Agency Name City of San Jose For Official Use Only Division, Department, or Region (if applicable) 2017 MAR 30 PM 1: 34 CMO - Budget Office Designated Agency Contact (Name, Title) Jennifer Maguire, Sr. Deputy City Manager Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: . 408-535-8144 webmaster.manager@sanjoseca.gov (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 16 @ \$126 Does the agency have a ticket policy? Yes⊠ No□ Event Description: Carrie Underwood Concert Date(s) \_\_09\_\_/ 10 16 Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ No □ If no: . Was ticket distribution made at the behest Yes ☒ No ☐ 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 Α. Name of Agency, Department or Unit of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy Passes City Manager's Budget Office Employee Recognition: Release of 2016-2017 Proposed 16 Budgets (Capital and Operating) Number Name of Individual В. of Ticket(s)/ Identify one of the following: (Last, First) Passes Ceremonial Role Other \_\_\_ Income If checking "Ceremonial Role" or "Other" describe below: Other  $\square$ Ceremonial Role Income If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ (include address and description) Passes 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. Norberto Dueñas City Manager

Agency Report of:

	Agency Name			S	RECEIVED A PUB an JogateStampClark C	alifornia OOO
	City of San Jose			· ·	meana and and	Form $802$
	Division, Department, or Reg	jion (if applicable)		701	6 AUG 17 AM 10: 53	For Official Use Only
	City Manager's Office			201		
	Designated Agency Contact	(Name, Title)			P OTC	
	Kim Walesh, Deputy City M	anager				Total Control (Control Control)
	Area Code/Phone Number	E-mail			Amendment (Must Provide E	xpiariation in Part 3.)
	(408) 535-8100	webmaster.manag	er@sanjoseca	a.gov	Date of Original Filing:	nth, day, year)
2.	Function or Event Infor	mation				
	Does the agency have a tic	ket policy? Yes	⊠ No □ Fa	ace Value of	Each Ticket/Pass \$ <u>199.00</u>	
	Event Description: Smart G	igabit Bay Area Con	ference D		<u>27 , 16 6</u>	, 28 <sub>/</sub> 16
	Tielset(e)/Deee(ee) may deled	Provide Title/ Expla				
	Ticket(s)/Pass(es) provided	by agency? Yes	⊠ No 🔲 If	no:	Name of Source	
	Was ticket distribution made	e at the behest Yes	□ No⊠ <sup>If</sup>	yes:	Official's Name (Last, First)	
	of agency official?				Official's Name (Last, Filst)	
3.	Recipients					
<b>,</b> .	•	ncy's department or unit. •	Use Section B to id	lentify an individ	ual. • Use Section C to identify an o	utside organization.
			Number			
	A. Name of Agency, Dep	artment or Unit	of Ticket(s)/ Passes	Describe th	e public purpose made pursuant to	o the agency's policy
			1			
	B. Name of Ind		Number of Ticket(s)/		Identify one of the following	g:
	B. Name of Ind (Last, Fir					g: -
	B. Name of Indi (Last, Fir Santosham, Shireen (Chie	st)	of Ticket(s)/ Passes		onial Role  Other	Income [
	(Last, Fir	st)	of Ticket(s)/	If check		Income [
	Santosham, Shireen (Chie	st) f Innovation Officer)	of Ticket(s)/ Passes	If check Broadband	onial Role Other Other on "Other" describe below the Networking	Income [
	Santosham, Shireen (Chie Russo, Khanh (Director, O	f Innovation Officer)  ffice Strategic	of Ticket(s)/ Passes	If check Broadband Cerem	onial Role Other Other on "Other" describe below of the other of the other of the other of the other other other other other of the other o	Income C
	Santosham, Shireen (Chie	f Innovation Officer)  ffice Strategic	of Ticket(s)/ Passes	If check Broadband Cerem	onial Role Other Other on "Other" describe below the Networking Other Other Other Other	Income C
	Santosham, Shireen (Chie Russo, Khanh (Director, O Partnership and Innovation	f Innovation Officer)  ffice Strategic	of Ticket(s)/ Passes  1  Number	ff check Broadband Cerem If check Broadban	onial Role Other of "Other" describe below the Common of t	Income [
	Santosham, Shireen (Chie Russo, Khanh (Director, O	f Innovation Officer)  ffice Strategic n)  rganization	of Ticket(s)/ Passes	ff check Broadband Cerem If check Broadban	onial Role Other Other on "Other" describe below of the other of the other of the other of the other other other other other of the other o	Income [
	Russo, Khanh (Director, O Partnership and Innovation	f Innovation Officer)  ffice Strategic n)  rganization	of Ticket(s)/ Passes  1  Number of Ticket(s)/	ff check Broadband Cerem If check Broadban	onial Role Other of "Other" describe below the Common of t	Income [
	Russo, Khanh (Director, O Partnership and Innovation	f Innovation Officer)  ffice Strategic n)  rganization	of Ticket(s)/ Passes  1  Number of Ticket(s)/	ff check Broadband Cerem If check Broadban	onial Role Other of "Other" describe below the Common of t	Income [
	Russo, Khanh (Director, O Partnership and Innovation	f Innovation Officer)  ffice Strategic n)  rganization	of Ticket(s)/ Passes  1  Number of Ticket(s)/	ff check Broadband Cerem If check Broadban	onial Role Other of "Other" describe below the desc	Income [
	Russo, Khanh (Director, O Partnership and Innovation	f Innovation Officer)  ffice Strategic n)  rganization	of Ticket(s)/ Passes  1  Number of Ticket(s)/	ff check Broadband Cerem If check Broadban	onial Role Other of "Other" describe below the desc	Income [
-	Russo, Khanh (Director, O Partnership and Innovation  C. Name of Outside O (include address and	f Innovation Officer)  ffice Strategic n)  rganization	of Ticket(s)/ Passes  1  Number of Ticket(s)/	ff check Broadband Cerem If check Broadban	onial Role Other of "Other" describe below the desc	Income [
	C. Name of Outside O (include address and	f Innovation Officer)  ffice Strategic n)  rganization I description)	of Ticket(s)/ Passes  1  1  Number of Ticket(s)/ Passes	Greek Broadbane  Cerem If check Broadban  Describe the	onial Role  Other  on "Other" describe below  onial Role  Other  onial Role  onial Role" or "Other" describe below  on the reservice	Income In
	Russo, Khanh (Director, O Partnership and Innovation  C. Name of Outside O (include address and	f Innovation Officer)  ffice Strategic n)  rganization I description)	of Ticket(s)/ Passes  1  1  Number of Ticket(s)/ Passes	Greek Broadbane  Cerem If check Broadban  Describe the	onial Role  Other  on "Other" describe below  onial Role  Other  onial Role  onial Role" or "Other" describe below  on the reservice	Income In
	C. Name of Outside O (include address and	f Innovation Officer)  ffice Strategic n)  rganization I description)	of Ticket(s)/ Passes  1  1  Number of Ticket(s)/ Passes	Greek Broadbane  Cerem If check Broadban  Describe the	onial Role  Other  on "Other" describe below  onial Role  Other  onial Role  onial Role" or "Other" describe below  on the reservice	Income In

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



of San Jose  Paginiante						
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:				
Lim-Tsao, Lily (Program Manager II)	. 1	Ceremonial Role Other Image Income In				
Salvail, Ken (DOT)	1	Ceremonial Role Other Image Income Income If checking "Ceremonial Role" or "Other" describe below:  Broadband networking				
Nguyen, Ho	1	Ceremonial Role Other M Income Income Income Drawnial Role or "Other" describe below:  Broadband networking				
	· · · · · · · · · · · · · · · · · · ·	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:				
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				

**Agency Report of:** Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California Form City of San Jose For Official Use Only Division, Department, or Region (if applicable) City Manager's Office **Designated Agency Contact** (Name, Title) Norberto Duenas, City Manager Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number Date of Original Filing: (408) 535-8100 webmaster.manager@sanjoseca.gov (month, day, year) 2. Function or Event Information Yes ☑ No ☐ Face Value of Each Ticket/Pass \$ 200.00 Does the agency have a ticket policy? Event Description: Copa America Centenario Date(s) 6 / 13 / 16 Provide Title/Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ No □ Was ticket distribution made at the behest Yes ☐ No ☒ If yes: \_\_\_ 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 Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit A. of Ticket(s)/ **Passes** Number Name of Individual B. Identify one of the following: of Ticket(s)/ (Last, First) Passes Ceremonial Role Other 🗵 Income \_\_\_ Walesh, Kim, Deputy City Manager If checking "Ceremonial Role" or "Other" describe below: 2 Networking opportunity with group in box Other 🗵 Ceremonial Role Income Wilcox, Lee, Budget Director (Mayor's Office) 2 If checking "Ceremonial Role" or "Other" describe below: Networking opportunity with group in box 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 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, Print Name Title (mohith, day/year) Signature of Agency Head or Designee

Comment: \_

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



Agency Name								
ity of San Jose  Recipients  • Use Section A to identify the ago								
A. Name of Agency, De		Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the ager	15.27				
B. Name of Inc.		Number of Ticket(s)/ Passes	Identify one of the following:					
Weerakoon, Ru (Senior F	Policy Advisor)	2	Ceremonial Role  Other  If checking "Ceremonial Role" or "Other" describe below:  Networking opportunity with group in box	Income [				
Cueto, Ruth (Policy Advis	or)	2	Ceremonial Role  Other  If checking "Ceremonial Role" or "Other" describe below:  Networking opportunity with group in box	Income [				
			Ceremonial Role  Other  If checking "Ceremonial Role" or "Other" describe below:	Income [				
			Ceremonial Role  Other  If checking "Ceremonial Role" or "Other" describe below:	Income				
C. Name of Outside (include address ar		Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agen	cy's policy				

	eremonial Role Events and Ticket/Pass Distributions and Agency Name			Date Stamp	California OOO		
	City of San Jose				Date Stamp	Form 802	
	Division, Department, or Reg	ion (if applicable)		701	6.000 -2 PM 4: 3	For Official Use Only	
	City Manager's Office	( upp=u.o)			OP OT		
	Designated Agency Contact (Name, Title)				Į.		
	Norberto Duenas, City Mana	•	•				
_	Area Code/Phone Number	E-mail			Amendment (Must Pro	vide Explanation in Part 3.)	
	(408) 535-8100	webmaster.manag	er@sanjosed	a.gov	Date of Original Filing:	(month, day, year)	
2.	Function or Event Infor	mation					
	Does the agency have a tick	cet policy? Yes	⊠ No□ ¹	Face Value of	Each Ticket/Pass \$ 89.	50	
	Event Description: Selena G	, ,		Date(s)5			
	Ticket(s)/Pass(es) provided	•		f no:			
		, agee,			Name of Source		
1	Was ticket distribution made of agency official?	at the behest Yes	□ No⊠ <sup>I</sup>	f yes:	Official's Name (Last, First)	A Production	
3.	Recipients • Use Section A to identify the agen	cy's department or unit.	Use Section B to	identify an individ	ual. • Use Section C to identif	y an outside organization.	
	A. Name of Agency, Department or Unit		Number of Ticket(s)/ Passes	Describe th	e public purpose made pursuant to the agency's policy		
	Office of the City Manager - Welcome San Jose Immigrant Integration Team		16	Employee R	ecognition		
	B. Name of India		Number of Ticket(s)/		Identify one of the foll	lowing:	
	(Last, Firs		Passes		onial Role Other Onial Role Other Other Other Other Other Other Other	Income [	
	-			Cerem	onial Role Other O	Income [	
				l .	ing "Ceremonial Role" or "Other" descri	_	
	C. Name of Outside Organization (include address and description)		Number of Ticket(s)/ Passes	Describe the	public purpose made pursu	ant to the agency's policy	
1	<b>/erification</b> have read and understand FPI with the requirements.	PC Regulations 18944	.1 and 18942.	I have verified th	nat the distribution set fort	h above, is in accordance	

	gency Report of: eremonial Role Even	ts and Ticket/P	ass Distr	ibutions	RECEIVED	ΑF	Public Document
1.	Agency Name			Californi		California 802	
	City of San Jose						101111
	Division, Department, or Reg	Division, Department, or Region (if applicable)				r Sh	For Official Use Only
	City Manager's Office			SP of			
	Designated Agency Contact (	Name, Title)					
	Norberto Duenas, City Mana	ager			Amendment (A	Must Pro	vide Explanation in Part 3.)
	Area Code/Phone Number	E-mail					
	(408) 535-8100	webmaster.manag	er@sanjosec	a.gov	Date of Original Fil	ling:	(month, day, year)
2.	Function or Event Inform	mation					
	Does the agency have a tick	et policy? Yes [	⊠ No 🗆 F	ace Value of	Each Ticket/Pass	\$ 129	9.50
	Event Description: Sharks v	s. Predators Playoff  Provide Title/ Expla.	Game [	Date(s)5	<u>, 7 , 16 </u>	_	
	Ticket(s)/Pass(es) provided	by agency? Yes [	⊠ No 🗆 🕸	f no:	Name of Source		
	Was ticket distribution made	at the behest Vas I		yes:	Official's Name (Last, I	_	
	of agency official?	163			Official's Name (Last, i	First)	
3.	Recipients • Use Section A to identify the agence	cy's department or unit. •	Use Section B to	dentify an individ	ual. • Use Section C to	identify	y an outside organization.
	A. Name of Agency, Department or Unit		Number of Ticket(s)/ Passes	Describe th	e public purpose made pursuant to the agency's policy		
	City Manager's Office - Soccer Complex Team		16	Employee R	ecognition		-
	B. Name of Indiv		Number of Ticket(s)/		Identify one of	the foll	lowing:
	(Luck, 1, we	<b>V</b> alorina (Tari Timo) i tempera aggi	Passes		nonial Role  Oth	ner 🔲	Income [
				1	onial Role Oth ing "Ceremonial Role" or "Oth	_	Income [
	C. Name of Outside Organization (include address and description)		Number of Ticket(s)/ Passes	Describe the	e public purpose made	e pursu	iant to the agency's policy
	Verification I have read and understand FPF with the requirements.	user canning from the control of the	1 and 18942. I	have verified th	hat the distribution s	set forti	h above, is in accordance
Market St.	Signature of Agency Head or Designe	Nonne	int Name	WO C	Ty Many	16	(month, day, year)

Agency Report of: Ceremonial Role	events and Ticket/	Pass Distr	ibutions	RECEIVEDA	Public Document
1. Agency Name				Date Stamp	California 802
City of San Jose					1 01111
Division, Department, o	or Region (if applicable)			1016 JUN -2 PM 4	For Official Use Only
City Manager's Office					
Designated Agency Co	ntact (Name,Title)			•	
Jennifer Maguire, Ser	ior Deputy City Manager			Amendment (Mark B	L Part Day (a)
Area Code/Phone Num	ber E-mail			Amendment (Must Pro	ovide Explanation in Part 3.)
(408) 535-8100	webmaster.mana	ger@sanjosec	a.gov	Date of Original Filing: _	(month, day, year)
2. Function or Event	Information				
Does the agency have	e a ticket policy? Yes	s⊠ No□ F	ace Value of	Each Ticket/Pass \$ 35	.00
Event Description: SJ	Earthquakes Soccer Ga	me		<u>, 24 , 16 </u>	
Ticket(s)/Pass(es) pro	•	_	f no:		
Hokek(b)/T add(cd) pro	vided by agency:		1110.	Name of Source	
Was ticket distribution	made at the behest Yes	s□ No⊠ <sup>lf</sup>	f yes:	Official's Name (Last, First)	
of agency official?				Oπiciai's ivame (Last, First)	•
3. Recipients • Use Section A to identify	he agency's department or unit.	• Use Section B to	identify an individ	tual. • Use Section C to identi	fy an outside organization.
	y, Department or Unit	Number of Ticket(s)/ Passes	T .	e public purpose made purs	
City of San Jose	City of San Jose		#ThankYou9	911 Appreciation Event	\
**************************************	of Individual ast, First)	Number of Ticket(s)/ Passes		Identify one of the fo	llowing:
See attached list of e	mnlovees		Cerem	nonial Role Other 🗵	Income _
	трюусса			king "Ceremonial Role" or "Other" desc 311 Appreciation Event	
	-		1	nonial Role Other of the description of the descrip	Income Income
	side Organization ess and description)	Number of Ticket(s)/ Passes	Describe the	e public purpose made pursu	uant to the agency's policy
					·
4. Verification		_L_	<u> </u>		
	nd FPPC Regulations 1894	4.1 and 18942. I	have verified to	hat the distribution set for	th above, is in accordance
4///1/10	- Alone		. 44 .	Com letous	
Signature of Agency Head or	Designee	Print Name	<u> </u>	City Manager Title	(phonth/day, year)
Comment:					

## #ThankYou911 Appreciation Event - 4/24/16 San José Earthquakes Major League Soccer Match

Last Name	First Name	Qty of Tickets
Gonzales	Marisa	5
Valenzuela	Saul	5
Wilson	Kristi	5.
Orozco-Esquivel	Christopher	2
Magnuson	Kate-Sara	4
Holseberg	Tiffany	4
Pace	Heather	2
Goulding	Jim	4
Landa	Dorlinda	. 4
Horton	Amanda	2
Gaan	Greg	2
Ospina	Amber	2
Maas	Jerry	2
Vaccaro	Wendy	4

			ibutions	. ,		blic Docum	1611f
. Agency Name		RECEIVE San Joatestanijo	/ Clei G	alifornia 🙎	12		
City of San Jose							
Division, Department, or Region	(if applicable)		2	016 APR 20 PI	<b>4 4:</b> 03	For Official Use On	ly
City Manager's Office							
Designated Agency Contact (Nat	Designated Agency Contact (Name, Title)						
Norberto Duenas, City Manage	Norberto Duenas, City Manager			Amendment (f	l Must Provide	Explanation in Part 3.	)
Area Code/Phone Number E-	rea Code/Phone Number E-mail			Removed C		,	•
(408) 535-8111 w	webmaster.manager@sanjoseca.gov			Date of Original Filing:(month, day, year)			
. Function or Event Informa	ition					_	
Does the agency have a ticket	Ooes the agency have a ticket policy? Yes ⊠ No ☐ Face Value of B					00	_
Event Description: Justin Biebe	er Concert  Provide Title/ Expla.	nation	Date(s)3/	17 / 16	<u></u>	_//	-
Ticket(s)/Pass(es) provided by	•		f no:	Name of Source			_
Was ticket distribution made at of agency official?	the behest Yes [	□ No⊠ <sup>If</sup>	f yes:	Official's Name (Last, I	First)		
Recipients							
• Use Section A to identify the agency's	• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual					outside organization	1.
A. Name of Agency, Department or Unit		Number of Ticket(s)/ Passes	Describe the	ne public purpose made pursuant to the agency's policy			licy
Office of the City Manager - Emergency Operations Center (EOC) Team		16	Employee Recognition: EOC Activation during SB50 week (Jan. 31 - Feb. 8, 2016)				
B. Name of Individu (Last, First)	ıal	Number of Ticket(s)/ Passes		Identify one of	the followi	ıg:	
				onial Role  Oth ng "Ceremonial Role" or "Oth	ner   mer" describe be		me 🗆
			B	onial Role  Oth	er 🔲 eer" describe be		me _
C. Name of Outside Organ (include address and des		Number of Ticket(s)/ Passes	Describe the	public purpose made	e pursuant (	o the agency's pol	icy

Comment:

Agency Report of:

**Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions** RECEIVED **A Public Document** 1. Agency Name Date Stamp California St orc **Form** City of San Jose AR 24 AM H: 40 For Official Use Only Division, Department, or Region (if applicable) City Manager's Office of Economic Development Designated Agency Contact (Name, Title) Kim Walesh, Deputy City Manager Amendment (Must Provide Explanation in Part 3.) **Area Code/Phone Number** Date of Original Filing: (408) 535-8100 webmaster.manager@sanjoseca.gov (month, day, year) 2. Function or Event Information Yes ☑ No ☐ Face Value of Each Ticket/Pass \$ 29.50 Does the agency have a ticket policy? Event Description: SB50 Opening Night Event Date(s) \_\_2\_/\_\_1\_/ Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ No □ If no: \_\_\_\_ Name of Source Was ticket distribution made at the behest Yes ☐ No ☒ If yes: \_ 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 A. 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 🗵 See attached list of employees If checking "Ceremonial Role" or "Other" describe below 44 Super Bowl 50 Opening Night (Media Night) at SAP Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization C. Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ (include address and description) Passes Verification I have read and understand FRPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements. Norberto Dueñas City Manager

# SB50 Opening Night Event - February 1, 2016 City of San Jose Attendees First Name

<b>Last Name</b>	First Name	<u>Title</u>	<b>Department</b>
Liccardo	Sam	Mayor	Mayor's Office
Herrera	Rose	Vice Mayor	District 8
Jones	Chappie	Councilmember	District 1
Kalra	Ash	Councilmember	District 2
Peralez	Raul	Councilmember	District 3
Carrasco	Magdalena	Councilmember	District 5
Nguyen	Manh	Councilmember	District 4
Oliverio	Pierluigi	Councilmember	District 6
Khamis	Johnny	Councilmember	District 10
Truijillo	Ted	Mayor Assistant	Mayor's Office
Low	David	Mayor's PIO	Mayor's Office
Castro	Huascar	Council Assistant	District 5
Moua	Louansee	Chief of Staff	Mayor's Office
Carrigan	Ryan	Council Assistant	District 7
	Rick		City Attorney's Office
Doyle		City Attorney	
Duenas	Norberto	City Manager	City Manager's Office
Sykes	Dave	Assistant City Manager	City Manager's Office
Walesh	Kim	Deputy City Manager	City Manager's Office
Maguire	Jennifer	Sr. Deputy City Manager	City Manager's Office
Rios	Angel	Director	PRNS
Clampitt	Brian	Event Coordinator	PRNS
Buchanan	Diane	Deputy Director	PBCE
Moran	Ed	Assistant City Attorney	City Attorney's Office
Freitas	Harry	Director	PBCE
Ruster	Jeff	Assistant Director	Work2Future
Borrelli	Juan	Dev. Services Sm. Bus. Ally	PBCE
Adams-Hapner	Kerry	Deputy Director	Office of Economic Dev.
O'Connor	Kevin	Assistant Director	Transportation
Becker	Kim	Director	Airport
McCaffrey	Kristina	Program Manager	Environmental Services
Guel	Lydia	Chief of Staff	District 3
Iglesias	Melina	Event Coordinator	Office of Cultural Affairs
Klein	Nanci	Assistant Director	Office of Economic Dev.
Roberts	Rachel	Special Ops - Division Mgr.	PBCE
Gomez	Rafael	Park Manager	PRNS
Scott	Rick	Interim Division Manager	Transportation
Hughey	Rosalynn	Assistant Director	PBCE
Weerakoon	Ru		Mayor's Office
Alvarez	Sal	Executive Analyst	Office of Economic Dev.
Turnipseed	Tammy	Corp Outreach Manager	Office of Cultural Affairs
Killgore	Teri	Downtown Manager	Office of Economic Dev.
Medina	Terry	Administrative Officer	Office of Economic Dev.
Day	Vicki	Marketing Director	Airport
Pedreira	Eduardo	Police	Police Department

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California Form City of San Jose For Official Use Only Division, Department, or Region (if applicable) City Manager's Office **Designated Agency Contact** (Name, Title) Norberto Duenas ☐ Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: (408) 535-8111 webmaster.manager@sanjoseca.gov (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ \$92.30 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: San Jose Step Up and Power Down 26 / Date(s) \_\_1 Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ⊠ No □ If no: Name of Source Was ticket distribution made at the behest Yes ☐ No ☒ If yes: . 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 Describe the public purpose made pursuant to the agency's policy Α. of Ticket(s)/ Passes City of San Jose PG&E Step Up and Power Down Commendation Luncheon 10 Number Name of Individual В. Identify one of the following: of Ticket(s)/ (Last, First) Passes Ceremonial Role Other 🗵 See attached list of employees if checking "Ceremonial Role" or "Other" describe below: PG&E to present commendations to staff at the Step Up and Power Down Luncheon Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below: 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 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

Comment: \_

# PG&E Step Up and Power Down - January 26, 2016 City of San Jose Attendees First Name

<u>Last Name</u>	<u>First Name</u>
Romanow	Kerrie
Loft	Jennie
Carpenter	Ariel
Benabente	Julie
Chapman	Ahmad
Dworjack	Safia
English	Megan
Ledesma	Paul
Huynh	Leanna
Starbird	Weston

**Agency Report of:** Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name California Date Stamp Form City of San Jose For Official Use Only Division, Department, or Region (if applicable) City Manager's Office Designated Agency Contact (Name, Title) Norberto Duenas, City Manager Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number Date of Original Filing: (408) 535-8100 webmaster.manager@sanjoseca.gov (month, day, year) 2. Function or Event Information Does the agency have a ticket policy? Face Value of Each Ticket/Pass \$ Yes ⊠ No □ Event Description: Shark's 25th Anniversary Celebration Date(s) \_\_1\_/\_ Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ⊠ No □ If no: \_\_ Was ticket distribution made at the behest Yes ☐ No ☑ If yes: \_ 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 Describe the public purpose made pursuant to the agency's policy Α. of Ticket(s)/ Passes City of San Jose Shark's 25 Anniversary at the SAP Center 28 Number Name of Individual B. Identify one of the following: of Ticket(s)/ (Last, First) Passes | Ceremonial Role Other X See attached list of employees If checking "Ceremonial Role" or "Other" describe below: City Manager's Office purchased the tickets and distributed the tickets to the attached list of attendees Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization 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 BOTO DUONA CITY Manger Comment: FPPC Form 802 (2/2016)

#### Sharks 25th Anniversary Celebration - January 19, 2016 City of San Jose Attendees

Last Name	<u>First Name</u>
Liccardo	Sam
Jones	Chappie
Kalra	Ash
Peralez	Raul
Nguyen	Manh
Oliverio	Pierluigi
Herrera	Rose
Khamis	Johnny
Doyle	Rick
Deignan	Patricia
Trujillo	Ted
Weerakoon	Ru
Santoshan	Shireen
Seagraves	Chelsey
Shih	Stacie
Tran	David
Buzo	Fred
Torres	Omar
Hughes	Scott
Moua	Louansee
Carrigan	Ryan
Groen	Mary Anne
Connelly	Shane Patrick
Walesh	Kim
Ortbal	Jim
Klein	Nanci
Shannon	Jim
Hughes	Bill

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

	REC			
San	Jose	City	Claripublic	Document

					<u> </u>	717 dbito = oddinono
1.	Agency Name	·			Date Stamp 2015 APR 10 PM 3	California 802
	City of San Jose				1	For Official Use Only
	Division, Department, or Region	on (If Applicable	(e)		ST Pouti	M.
	City Manager's Office		WI POOVIV	I" /		
	Designated Agency Contact (A	lame,Title)	1	0		
	Dave Sykes, Interim Assistar	nt City Mana				
	Area Code/Phone Number   E-mail				Amendment (Must pro	ovide explanation in Part 3.)
	(408) 535-8100	webmaster.	manager@s	anjoseca.gov	Date of Original Filing:	(Month, Day, Year)
2.	Function or Event Inform	nation				
	Does the agency have a ticket	policy?	Yes 🛛 No	☐ Face Value of	of Each Ticket/Pass \$	\$82
	Event Description SaberCats	v. LA Kiss		Data(a) 4		, ,
	Event Description	Provide Title/Exp	lanation	Date(s)		
	Ticket(s)/Pass(es) provided by	agency?	Yes <b>⊠</b> No	☐ If no:	Name of Sour	·
	( )	5 ,	TOO EAT THO	<u></u>	Name of Sour	ce
	Was ticket distribution made at	the behest	No 🛛 Yes	☐ If yes:	Official's Name (La	ent Einst
	of agency official?				Official's Ivanie (La	101, 1 1101)
3.	Recipients	- 1				
	Use Section A to identify the agency's		Number of			
	A. Name of Agency, Departmen	t or Unit	Ticket(s)/ Pass(es)	Describe the pub	lic purpose made pursuant to	o the agency's policy
	City of San Jose Employees	- San Jose		Workforce Survey F	Participation Winners	en en eller der film betriftet inn mit Heige betried mit betried film betried film betriede en en en en eller e En eller betriede en eller el
	Fire Department		24			
		,				
	B. Name of Individual		Number of Ticket(s)/		Identify one of the following	g:
	(Last, First)		Pass(es)			
		•		Ceremonial Role	Other D	Income
				Ceremonial Role	Other	Income
				If checking "Ceremoni	al Role" or "Other" describe below:	
			Number of			
	C. Name of Outside Organize (include address and descr		Ticket(s)/ Pass(es)	Describe the publ	lic purpose made pursuant to	the agency's policy
•			, , , , , , , , , , , , , , , , , , ,	and the said and the state of the said and the said and said and said		<u> Maryanan artika kananan kanangan, dalah meneri kal</u>
				·	HT SHITTING	
_	\/!£!4!					
	<b>Verification</b> have read and understa <u>nd</u> FPPC Regulati	ions 18944.1 and	I 18942. I have ve	rified that the distribution set fo	rth above, is in accordance with t	the requirements.
-	N-05.1		vio Sy		_	4/4/1
-	Signature of Agency Head or Designee	<u></u>	Print Nam		<u>Terim Assistant</u> M Mawaler	(Month, Day, Year)
				<b>~</b>	A service and officers of	•
	Commont:					

#### Tsukamoto, Kathy

From:

Rangel, Charles

Sent:

Friday, April 03, 2015 3:14 PM

To:

Tsukamoto, Kathy; Shelly Wang

Subject:

RE: 04/04 SaberCats Tickets - WorkForce Survey Winners SJFD

Kathy,

Here is a list of the employees that were able to take advantage of the offer. We had a few people not able to make it at the last minute so I gave some tickets to family members of city employees that will be attending. No one that has non suite tickets will be going to the suite. I will not be attending. If you need a contact you can use Brian Van Den Broeke Thank you for your help.

Alyssa Villaneuva +3 (FD timekeeper)
Scott Coscarelli +4 (Captain)
Angela Jacobs +4 (Battalion Chief)
Brian Van Den Broeke +1 (Fire Communications)
Gina Capurso +2 (Fire administration)
Bret Gervasoni +2 (Captain)

Chuck Rangel DC SJFD

Agency Name				Public Documer	
City of San Jose			2015 APR 15 PM 3:T		
Division, Department, or Region (If Applicable,	(M/paill	For Official Use Only			
City Manager's Office	DLAMK.				
Designated Agency Contact (Name, Title)					
Dave Sykes, Interim Assistant City Manag			•		
Area Code/Phone Number E-mail	<del></del>		Amendment (Must provide	explanation in Part 3.)	
(408) 535-8100 webmaster.n	nanager@s	anjoseca.gov	Date of Original Filing:	fonth, Day, Year)	
Function or Event Information				\$90-\$153	
Does the agency have a ticket policy?	Yes 🗵 No	· · · · · · · · · · · · · · · · · · ·	of Each Ticket/Pass \$		
Event Description Sharks vs. Colorado Ava	lanche	Date(s)4	, 1 , 15		
Provide Title/Expla	nation				
Ticket(s)/Pass(es) provided by agency?	Yes⊠ No	☐ If no:	Name of Source	· · · · · · · · · · · · · · · · · · ·	
Was ticket distribution made at the behest	No ⊠ Yes	☐ If yes:			
of agency official?			Official's Name (Last, F	First)	
Recipients					
Use Section A to identify the agency's department or u	nit. • Use Se	ction B to identify an individu	ıal. ● Use Section C to identify ar	outside organization.	
A. Name of Agency, Department or Unit	Ticket(s)/ Pass(es)	Describe the pub	lic purpose made pursuant to th	e agency's policy	
City of San Jose Employees -		Attended the San Jose Sharks game vs. Colorado			
Department of Transportation	16	Avalanche-Workfor	rce Survey Participation Winners		
	Number of				
B. Name of Individual (Lest, First)	Ticket(s)/ Pass(es)		Identify one of the following:		
		Ceremonial Role	Other	Income	
		If checking "Ceremoni	al Role" or "Other" describe below:		
•					
		Ceremonial Role	Other	Income	
		If checking "Ceremoni	al Role" or "Other" describe below:	•	
			•		
Name of Outside Operation	Number of				
C. Name of Outside Organization (include address and description)	Ticket(s)/ Pass(es)	Describe the publ	lic purpose made pursuant to the	agency's policy	
				,	
		,			
Verification					
I have read and understand FPPC Regulations 18944.1 and 1	18942. I have ve	erified that the distribution set fo	rth above, is in accordance with the r	equirements.	

_	eremonial Role Ever	its and 110	KevPass	Distributions	San Inea C	VED A Public Documer
1.	Agency Name				Date Stamp	California Q02
	City of San Jose				2015 MAR - 4	Form OU2
	Division, Department, or Reg	gion (If Applicable	9)		(R) Rouse	For Sphicial Use Only
	City Manager's Office		1 1		1 2000	
	Designated Agency Contact	(Name, Title)				
	Dave Sykes, Interim Assist	ant City Mana	ger		Amendment (Must provide explanation in Part 3.)	
	Area Code/Phone Number	E-mail				,
	(408) 535-8100		manager@s	anjoseca.gov	Date of Original Filing:	(Month, Day, Year)
2.	Function or Event Info					\$90-\$135
	Does the agency have a ticke	•	Yes ⊠ No	_	of Each Ticket/Pass \$	
	Event Description Sharks v.	Montreal Can	adians	Date(s) <u>3</u>	2	
	""'. I . 17 \ / ">	•		Ir		
	Ticket(s)/Pass(es) provided b	by agency?	Yes⊠ No	☐ If no:	Name of Sou	rce
	Was ticket distribution made	at the behest	No <b>⊠</b> Yes	☐ If yes:		
	of agency official?				Official's Name (L	ast, First)
3.	Recipients  • Use Section A to identify the agence	cy's department or	unit.   • Use Se	ction B to identify an individu	ual. ● Use Section C to identi	fy an outside organization.
	A. Name of Agency, Departm		Number of Ticket(s)/ Pass(es)		lic purpose made pursuant	
	City of San Jose Employee and City Auditor's Office	s - City Clerk	16		ose Sharks game v. M Participation Winners	ontreal Canadians -
	See Attached List					
	B. Name of Individu	al	Number of Ticket(s)/		Identify one of the following	ıg:
			Pass(es)	Ceremonial Role  If checking "Ceremoni	Other is all Role" or "Other" describe below:	Income [
١				Ceremonial Role	Other al Role" or "Other" describe below:	Income [
						`
Busine (785) 1 (1994) 1 (1994)	Name of Outside Orgar (include address and des		Number of Ticket(s)/ Pass(es)	Describe the publ	lic purpose made pursuant t	o the agency's policy
•					·	
	Verification	lations 19044 1 and	18042   have	rified that the distribution and fo	rth above is in penallilate with	the requirements
4	have read and understand FPPC Regu	_	18942. I nave ve vio Syv		rtn above, is in accordance with	the requirements.

**Agency Report of:** 

Comment: \_

#### Sharks v. Montreal Canadians Workforce Survey Participants Winners City of San José Employees – March 2, 2015

LAST NAME	FIRST NAME
Roussel	Sylvie
Tran	Anh
Krantz	Ruth
Gutierrez	Christina
Guzzetta	Suzanne
McDaniel	Cecilia
Hedges	Cheryl
McInnis	Ali
Pauly	Tommy
Hsiung	Amy
Chiang	Daniel
Garaffo	Erica
Garaffo	Stephan
Houston	Michael
Vuong	Minh Dan
Bonifacio	Adrian

Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California **Form** City of San Jose PM 1: 12 For Official Use Only Division, Department, or Region (If Applicable) City Manager's Office **Designated Agency Contact** (Name, Title) Ed Shikada, City Manager ☐ Amendment (Must provide explanation in Part 3.) **Area Code/Phone Number** E-mail Date of Original Filing: . (408) 535-8100 webmaster.manager@sanjoseca.gov (Month, Day, Year) 2. Function or Event Information 20.00 Does the agency have a ticket policy? Face Value of Each Ticket/Pass \$ \_ Yes 🛛 No 🗌 Event Description SJSU/Colorado State Football Game Provide Title/Explanation Ticket(s)/Pass(es) provided by agency? If no: . Yes ⊠ No □ Name of Source Was ticket distribution made at the behest No X Yes □ If yes: . Official's Name (Last, First) of agency official? 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. Number of Name of Agency, Department or Unit Describe the public purpose made pursuant to the agency's policy Ticket(s)/ Pass(es) City of San Jose City Employee Appreciation Day 95 Number of B. Name of Individual Ticket(s)/ Identify one of the following: (Last, First) Pass(es) Ceremonial Role Other 🗵 Income \_\_\_ See attached list of employees If checking "Ceremonial Role" or "Other" describe below: City Employee Appreciation Day Ceremonial Role Other 🗌 Income If checking "Ceremonial Role" or "Other" describe below: Number of Name of Outside Organization C. Ticket(s)/ Describe the public purpose made pursuant to the agency's policy (include address and description) Pass(es) N/A 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. CITY MONAGER ED SUIKARDA Signature of Agency Head or Designee

**Agency Report of:** 

Comment: \_

# CSJ Employee Appreciation Event -11/01/2014 Football Game Spartan vs. Colorado State

Last Name	First Name	Qty of Ticket
Barefoot	Ruth	2
Brooks	Ed	2
Brown	Michael	2
Burke	Laura	2
Cavinta	Joel	2
Chavez	John	2
Chen	Genhan	2
Curiel	Teresa	2
Dines	Michael	2
Duba	Ronald	2
Farrant	Tim	2
Ferguson	Fawna	2
Floyd	David	2
Gomez	Becki	2
Gomez. Jr	Isidro	2
Hernandez	Claudia	2
Но	Joe	2
Howard	Barbara	1
Lin	Walter	2
Majmudar	Ranak	2
Mancera	Regina	2
McDermott	Patty	2
Meek	Greg	2
Mullen	Margaret	2
Murphy	Paul	2
Nguyen	Minh	2
Nyambok	Shadrack	2
Olmos	Alberto	2
Parkman	Brian	2
Peterson	Jim	2
Raman	Sowmya	2
Rapaut	Michael	2
Riddle	Courtney	$\frac{2}{2}$
Romanazzi	Lauren	2
Ross	Danielle	2
Sabatelli	Gordana	2
Sanchez	Beatriz	2
Shuck	Michael	2
Supan	William	2
Sutherland	Duncan	2
Tu	Tong (John)	2
Turner	Seth	2
Veras	Lenis	2
Wilson	Eunice	2
		2
Wong	HingLam	2
Wright	Kenney	
Yanson	Edwardo	2 2
Zacarias	Jose	

. Agency Name				Date Stamp	Californ	ia RN2
City of San Jose		. 2	OPA OCT	22 AM ID: 18		
Division, Department, or Region (If Ap	plicable)			DIOTC	For Offi	cial Use Only
City Manager's Office						
Designated Agency Contact (Name, Titl	le)					
Ed Shikada, City Manager					<u> </u>	
Area Code/Phone Number E-mail			─	Amendment (Must pr	ovide explanatio	n in Рап З.)
(408) 535-8100 webma	aster.manager@s	anjoseca.gov	Date	of Original Filing: _	(Month, Day,	Year)
. Function or Event Information				-		50.00
Does the agency have a ticket policy?		_		Ticket/Pass \$		
Event Description NY Yankees vs. To	oronto Blue Jays	Date(s) .	9 /	<u>18 , 14 </u>		
Provide I.	itle/Explanation					
Ticket(s)/Pass(es) provided by agency	/? Yes⊠ No	☐ If no:		Name of Sou	ırce	
Was ticket distribution made at the bel of agency official?	nest No 🛛 Yes	☐ If yes:		Official's Name (L	ast, First)	
. Recipients				<u>.</u>		
Use Section A to identify the agency's departn	nent or unit. • Use Sec	ntion B to identify an in				
		Ction B to identify an in	dividual. ● l	Jse Section C to identi	ify an outside o	rganization.
A. Name of Agency, Department or Unit	Number of Ticket(s)/ Pass(es)			ose made pursuant		
A. Name of Agency, Department or Unit  City of San Jose City Manager's Off	Ticket(s)/ Pass(es)	Describe the	e public purp ew York Y	<del>general States and the second second</del>	to the agency'	s policy ys baseball
The American	Ticket(s)/ Pass(es)	Describe the	e public purp	ose made pursuant f	to the agency'	s policy ys baseball
The American State of the Control of	Ticket(s)/ Pass(es)	Describe the	e public purp ew York Y JSV Cham	ose made pursuant f	to the agency' nto Blue Ja e Study Mis	s policy ys baseball
City of San Jose City Manager's Off  B. Name of Individual	Ticket(s)/ Pass(es)  ice 12  Number of Ticket(s)/	Attended the N game during So	ew York Y JSV Cham Identi	fy one of the following of ther of the following of the f	to the agency' nto Blue Ja ee Study Mis	s policy ys baseball ssion Trip
City of San Jose City Manager's Off  B. Name of Individual (Last, First)	Ticket(s)/ Pass(es)  ice 12  Number of Ticket(s)/	Describe the Attended the N game during So  Ceremonial F If checking "Ce Attended the N	ew York Y  SV Cham  Identi	fy one of the following	nto Blue Ja ee Study Mis	ys baseball ssion Trip
City of San Jose City Manager's Off  B. Name of Individual (Last, First)	Ticket(s)/ Pass(es)  ice 12  Number of Ticket(s)/	Describe the Attended the N game during S.  Ceremonial F If checking "Ce Attended the N game during th  Ceremonial F	ew York Y JSV Cham  Identi  Role  remonial Role* C ew York Y e SJSV C	fy one of the following of the or of commerce of the following of the foll	nto Blue Ja ee Study Mis	ys baseball ssion Trip
City of San Jose City Manager's Off  B. Name of Individual (Last, First)	Ticket(s)/ Pass(es)  ice 12  Number of Ticket(s)/	Describe the Attended the N game during S.  Ceremonial F If checking "Ce Attended the N game during th  Ceremonial F	ew York Y JSV Cham  Identi  Role  remonial Role* C ew York Y e SJSV C	fy one of the following of the scribe below:  ankees vs. Toron the following of the scribe below:  ankees vs. Toron than ber of Commoduler	nto Blue Ja ee Study Mis	s policy  ys baseball  Income  ys baseball  Mission Trip
City of San Jose City Manager's Off  B. Name of Individual (Last, First)	Ticket(s)/ Pass(es)  ice 12  Number of Ticket(s)/	Describe the Attended the N game during So  Ceremonial F If checking "Ce Attended the N game during th  Ceremonial F If checking "Ce	ew York Y JSV Cham  Identi Role  remonial Role* of ew York Y es JSV C Role  remonial Role* of	fy one of the following of the scribe below:  ankees vs. Toron the following of the scribe below:  ankees vs. Toron than ber of Commoduler	nto Blue Ja e Study Mis	s policy  ys baseball ssion Trip  Income  ys baseball Mission Trip  Income

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)

FPPC Form 802 (4/12)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)

#### New York Yankees vs. Toronto Blue Jays Baseball Game during the SJSV Chamber of Commerce Mission Study Trip

### City of San Jose Attendees – September 18, 2014

<u>Last Name</u>	<u>First Name</u>
Constant	Pete
Ferguson	Jerad
Willey	Ken
Shikada	Ed
Freitas	Harry
Sykes	Dave
<b>Morales-Ferrand</b>	Jacky
Aguirre	Kim
Jacobson	Curtis
Klein	Nanci
Burton	Chris
Sedwick	Kathryn

	y Name				Date Stamp	California 802	
City of S	San Jose			201	OCT 22 AM 10: 16		
Division,	Department, or Re	egion (If Applicable	6.01		For Official Use Only		
Citv Mar	nager's Office		est orc				
-	ted Agency Contac	t (Name, Title)					
Ed Shika	ada, City Manage	r					
	de/Phone Number	E-mail			Amendment (Must provide	explanation in Part 3.)	
(408) 53	5-8100	webmaster.r	nanager@s	anjoseca.gov	Date of Original Filing:	Month, Day, Year)	
Functio	on or Event info	ormation				00.00	
Does the	agency have a ticl	ket policy?	Yes⊠ No	☐ Face Value o	f Each Ticket/Pass \$	89.00	
Event De	escription Brooks A	Atkinson Theatre	e - Love Lett	ters Date(s)9			
Ticket(s)/	/Pass(es) provided	by agency?	Yes 🛛 No	☐ If no:	Name of Source		
	et distribution made cy official?	e at the behest	No⊠ Yes	☐ If yes:	Official's Name (Last, I	First)	
Recipie • Use Secti		ncy's department or	unit. • Use Sec	ction B to identify an individu	al. ● Use Section C to identify ar	outside organization.	
A. Name of Agency, Department or Unit		Number of Ticket(s)/ Pass(es)	Describe the publ	ic purpose made pursuant to th	e agency's policy		
City of San Jose City Manager's Office		12		ttended the Broadway show Love Letters at the Brooks Atkinso heatre during SJSV Chamber of Commerce Study Mission Trip			
В.	Name of Individ	iual	Number of Ticket(s)/		Identify one of the following:		
See atta	ched list of attend	ees	Pass(es)	Ceremonial Role	<del></del>	Income	
See atta	ched list of attend	ees	Pass(es)	If checking "Ceremonia Attended the Broad	Other   Other   Role" or "Other" describe below:  Way show Love Letters at  Commerce Study	the Brooks Atkinso	
See atta	ched list of attend	ees	Pass(es)	if checking "Ceremonia Attended the Broad" Theatre - SJSV Cha Ceremonial Role	al Role" or "Other" describe below: way show Love Letters at amber of Commerce Stud	the Brooks Atkinso	
<b>C</b> 200	ched list of attend  Name of Outside Org include address and d	anization	Number of Ticket(s)/ Pass(es)	If checking "Ceremonia Attended the Broad Theatre - SJSV Cha Ceremonial Role [ If checking "Ceremonia	al Role" or "Other" describe below: way show Love Letters at amber of Commerce Stud ☐ Other ☐	the Brooks Atkinso Mission Trip Income	
<u>C</u>	Name of Outside Org	anization	Number of Ticket(s)/	If checking "Ceremonia Attended the Broad Theatre - SJSV Cha Ceremonial Role [ If checking "Ceremonia	al Role" or "Other" describe below: way show Love Letters at amber of Commerce Study  Other  land Role" or "Other" describe below:	the Brooks Atkinso Mission Trip Income	
<b>C</b> 2000	Name of Outside Org	anization	Number of Ticket(s)/	If checking "Ceremonia Attended the Broad Theatre - SJSV Cha Ceremonial Role [ If checking "Ceremonia	al Role" or "Other" describe below: way show Love Letters at amber of Commerce Study  Other  land Role" or "Other" describe below:	the Brooks Atkinso Mission Trip Income	

Comment: \_\_\_

## Broadway Show Love Letters at the Brooks Atkinson Theatre during the SJSV Chamber of Commerce Mission Study Trip

City of San Jose Attendees – September 17, 2014

<u>Last Name</u>	<u>First Name</u>
Constant	Pete
Ferguson	Jerad
Willey	Ken
Shikada	Ed
Freitas	Harry
Sykes	Dave
<b>Morales-Ferrand</b>	Jacky
Aguirre	Kim
Jacobson	Curtis
Klein	Nanci
Burton	Chris
Sedwick	Kathryn

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

RECEIVED San Jose City Clerk Public Document

	<u> </u>					The date of the control of the contr	
1.	Agency Name				Date Stamp California O 1 2		
	City of San Jose  Division, Department, or Region (If Applicable)				1014 SEP 10 AM 10:	Form OU4	
					MOTO	For Official Use Only	
	City Manager's Office						
	Designated Agency Contact (Name, Title)				1		
	Ed Shikada, City Manager				<u> </u>		
	Area Code/Phone Number   E-mail				Amendment (Must provide explanation in Part 3.)		
	(408) 535-8111	webmaster.r	manager@s	anjoseca.gov	Date of Original Filing:	(Month, Day, Year)	
2.	Function or Event Infor	mation				0.5.00	
	Does the agency have a ticket policy? Yes $\boxtimes$ No $\square$			Face Value of	of Each Ticket/Pass \$	65.00	
	Event Description Dionne Wa	anation	Date(s)8				
	Ticket(s)/Pass(es) provided by agency? Yes ⊠ No [			☐ If no:			
	Was ticket distribution made at the behest No ⊠ Yes [ of agency official?		If yes:Official's Name (Last, First)				
3.	Recipients	e dengriment or	unit elles So	ction R to identify an individ	ural Allea Section C to Identif	Fu on outside organization	
	A. Name of Agency, Department or Unit		Number of Ticket(s)t Pass(es)	ction B to identify an individual. • Use Section C to identify an outside organization.  Describe the public purpose made pursuant to the agency's policy			
	City of San Jose City Manager's Office		12	Sister Cities International Annual Conference in San Jose Dionne Warwick Concert (San Jose Center for Performing Arts)			
	B. Name of Individual (Last, First)		Number of Ticket(s)/ Pass(es)		Identify one of the followin	g:	
	See attached list of employees			<u>-</u>	niel Role" or "Other" describe below:	nce in San Jose Dionne	
				Warwick Concert (	San Jose Center for Pe	rforming Arts)	
			,		Other Inial Role" or "Other" describe below:	income	
	C. Name of Outside Organ (include address and des		Number of Ticket(s)/ Pass(es)	Describe the put	olic purpose made pursuant t	o the agency's policy	
	•						
4.	Verification I have read and understand FPPC Regu	lations 18944.1 and	l 18942. I have ve	erified that the distribution set i	forth above, is in accordance with	the requirements.	
¢	EN SHIKADA		CI	TY MONDUER	9/2/12		
	Signature of Agency Head or Designee		. Print Nem	ne .	Tille	(Month, Day, Year)	
	Comment:						

#### Sister Cities International Annual Conference in San Jose Dionne Warwick Concert (San Jose Center for Performing Arts) City of San Jose - City Manager's Office Attendees - August 1, 2014

<u>Last Name</u>	First Name	<b>Oty of Tickets</b>
Azevedo	Ernest	1
Dominguez	Marta	2
Duenas	Norberto	2
Fong	Jocelyn	2
Park	Karen	2
Pham	Jessica	2
Skeje	Linden	1

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

A Public Document

	······································	25.89.45			• XC X X X X X X X X X X X X X X X X X X
I. Agency Name	gency Name			Date Stamp	California 277
City of San Jose					Form 904
Division, Department, or Region (If Applicable)				For Official Use Only	
					•
City Manager's Office					
Designated Agency Contact (/	Designated Agency Contact (Name, Title)				
Ed Shikada, City Manager	Ed Shikada, City Manager				1
	E-mail			Amendment (Must pro	vide explanation in Part 3.)
(408) 535-8111	webmaster.m	anager@sa	anioseca.gov	Date of Original Filing:	(Month, Day, Year)
	50Cyrmanian (1900)		J		(Monus, Day, Tear)
2. Function or Event Information  Does the agency have a ticket policy?  Yes 🔀 No 🗀 Face Value of Each Ticket/Pass \$				20.00	
	100 E 140 E				
Event Description SJSU/Fresno State Football Game Date(s)				, 29 , 13	////
Event Becompact	Provide Title/Expla	nation			
Ticket(s)/Pass(es) provided by	Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐				
·.				Name of Sour	ce
Was ticket distribution made a	Was ticket distribution made at the behest No ☒ Yes ☐				
of agency official?			•	Official's Name (La	st, First)
B. Recipients					
Use Section A to identify the agency	r's department or u	nit.   • Use Sec	ction B to identify an individ	ual. • Use Section C to identif	y an outside organization.
A. Name of Agency, Departme	nt or Unit	Number of Ticket(s)/ Pass(es)	Describe the pub	olic purpose made pursuant t	o the agency's policy
City of San Jose		210	City Employee Appreciation Day		
	······				
		Number of			
B. Name of Individual (Last First)		Ticket(s)/ Pass(es)	Identify one of the following:		
	See attached list of employees			Other 🛛	Income
See attached list of employe			If checking "Ceremonial Role" or "Other" describe helow:  City Employee Appreciation Day		
		ļ ·			
			Ceremonial Role	Other Dail Role" or "Other" describe below:	. Income
•			ii checking deremor	ilar Note: Or Other describe below.	·
		hi embor of			
	C. Name of Outside Organization Number of Ticket(s)/		Describe the put	olic purpose made pursuant t	o the agency's policy
		Pass(es)			
N/A					
					- Annothing .
-					•
			·		
4. Verification					
<ol> <li>Verification         I have read and understand FPPC Regu.     </li> </ol>	lations 18944.1 and	18942. I have ve	erified that the distribution set	forth above, is in accordance with	the requirements.
5/2.		HIKOTA		2000 Marketa	1/14/14
Signature of Assessed Local and Decisions		Print Nan		Title	(Month, Day, Year)
Signature of Agency Head or Designee		riin Nan	no.	· WC	(
Commont	•		•		
Comment:					

### CSJ Employee Appreciation Event – 11/29/13 Football Game Spartan vs Fresno Attendees

Last Name	First Name	Qty of Ticket
Abe	Roger	2
Alexander	Linda	2
Anderson	Courtney	2
Aponte	Steven	2
Aspinwall	Tara	2
Avalos	Belen	2
Avalos	Jose	2
Bagshaw	Charles	2
Borges	Louis	2
Burke	Laura	2
Campos	Xavier	2
Capurso	Gina	2
Castro	Adriel	2 : :
Castro Jr.	Jesus	2
Chen	Dennis	2
Cicirelli	Jon	2
Clements	Kristen	2
Curiel	Teresa	2
Daggs	Sonja	2
Dawson	Nelson	2
De La Cruz	Jose	2
Dominguez	Karina	2
Dominguez	Eduardo	2
Dwyer	George	2
Espinosa	Derek	2
Espinoza	Margaret	2
Freimarck	Kevin	2
Galindo	Mario	2
Garcia	Sandra	2
Goins	Jack	2
Gomez	Rafael	2
Gonzalez	Eileen	2
Goodwin	Melody	2
Grabowski	Ann	2
Gregoire	Ken	2
Grijalva	Tony	2
Grijaiva	Carlos	2
Guerrero	Diviel	2
Gutierrez	Christina	2
Gutierrez	Salvador	2

Gutierrez	Jerry	2
Hardy	Jerrell	2
Hernandez	Julian	2
Holmboe	Jennifer	2
Hove	Erik	2
Kapoor	Tina	2
Khoury	Merna	2
Khoury	Samantha	2
Kortright	Veronica	2
Kraus	Kenneth	2
Krygier	Chris	2
Lacy	Susan	2
Landa	Doralinda	2
Lao	Edward	2
Lin	Walter	2
Lipari	Mark	2
Llanos	Sandra	2
Maldonado	Steve	2
Marcus	Adam	2
Martinez	John	2
Martinez	Stephanie	2
McLaughlin	Don	2
Mendoza	Juan	2
Mendoza	Rosario	2
Monterosso	Mike	2
Montoya	Dan	2
Moran	Ed	2
Moreno	Eddie	2
Morin	Rita	2
Murillo	Oscar	2
Murphy	Paul	1
Muscatell	Rory	2
Niles	Alex	2
Oliverio	Pierluigi	2
Olmos	Alberto	1
Ordaz	Salina	2
Ordunez	Joe	2
Ortiz		2
Parimanam	Sally Ravendran	2
	<u> </u>	2
Perez	Jess	2
Perez	Cynthia	2
Peterson	Jon Mishala	
Phillips	Michele	2
Profio	Jeff	2
Quisol	Cesar	2

Ramirez	Rachel	2
Ramos	Angelica	2
Raoof	Abe	2
Render	Dacota	2
Robert	Keith II	2
Rodriguez	Max	2
Rojas	Alex	2
Ruster	Jeff	1
Saavedra	Joshua	1 (Duplicate)
Salas	Jesse	2
Salvano	Ray	2
Sandberg	Robert	2
Schriefer	G	2
Serrrano	Julio	. 2
Shikada	Ed	2
Shore	Alice	2
Silva	James	2
Smith	Todd	2
Stankov	Lindy	2
Stuchinsky	Laura	2
Supan	William	2
Sykes	Dave	2
Taylor	Pamela	2
Tokunaga	Traci	2
Trahan	Maxine	2
Travers	Vernon	2
Tsukamoto	Kathy	2
Van Gastel	Morgan	2
Van Gastel	Karl	2
Vargas	Eduardo	2
Vieira	Heidi	2
Wappler	Edwin	2
Welch	Tom	2
Wong	Jim	2
Yang	Yamina	2
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