

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

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1. Agency Name City of San Jose		San Jose City Clk <i>otc</i> Date Stamp 2021 NOV 12 PM 3:33	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) Mayor's Office			
Designated Agency Contact (Name, Title) Rhonda Hadnot, Chief Operation Officer			
Area Code/Phone Number 408.535.4800	E-mail rhonda.hadnot@sanjoseca.gov	<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _____ (month, day, year)	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 200.50

Event Description: Alejandro Fernandez Concert Date(s) 10 / 15 / 21
Provide Title/Explanation

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

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

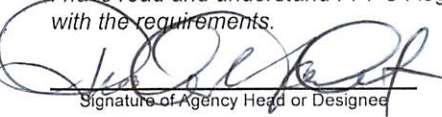
3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
See attached list	16	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Santa Clara County Vaccination Raffle
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy

4. Verification

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

	Rhonda Hadnot	COO-Mayor's Office	11/3/21
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(month, day, year)</small>

Comment: This was a joint collaboration between City/County as an incentive for residents to get the COVID-19 vaccine.

Alejandro Fernandez Concert
October 15, 2021
Attendees

<u>Last Name</u>	<u>First Name</u>	<u>Quantity of Tickets</u>
Diaz	Hilda	2
Hernandez	Antonia	2
Gaspar	Rocio	2
Thangavelu	Jeganath	2
Beltran	Guadalupe	2
Sanchez	Pedro	2
Ramos	Joanna	1
Fonseca	Indira	1
Garner	Clay	1
Hadnot	Rhonda	1

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

A Public Document

1. Agency Name City of San Jose		Date Stamp San Jose 57C JRW JUL 15 PM 2:11	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) Office of Mayor Sam Liccardo			
Designated Agency Contact (Name, Title) Khanh Russo, Sr. Policy Advisor			
Area Code/Phone Number 408.535.4800	E-mail theofficeofmayorsamliccardo@sanjoseca.gov	<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _____ <small>(month, day, year)</small>	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 295.00

Event Description: Paul McCartney Concert Date(s) 7 / 10 / 19
Provide Title/Explanation

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

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

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Please see attached list.		Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> San Jose Promise Donor + Partner Recognition
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy

4. Verification

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

[Signature] Rhonda Hadnot COV- Mayor's Office 7/15/19
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: _____

Date	Event	Name	Company	No. of tickets
7.10.19	Paul McCartney Concert	Sam Liccardo (wife, Garcia-Kohl, Jessica)	City of San Jose	2
7.10.19	Paul McCartney Concert	Khanh Russo	City of San Jose	2
7.10.19	Paul McCartney Concert	Steve Milligan	Western Digital	2
7.10.19	Paul McCartney Concert	Andy Ball	Rad Urban	2
7.10.19	Paul McCartney Concert	Gina Dalma	Silicon Valley Community Foundation	2
7.10.19	Paul McCartney Concert	Kr Sridhar	Bloom Energy	3

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

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A Public Document

1. Agency Name <u>City of San Jose</u>		San Jose City Clerk Date Stamp <u>OTCA</u> 2019 MAY 15 PM 3:44	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) <u>Office of Mayor Sam Liccardo</u>		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _____ (month, day, year)	
Designated Agency Contact (Name, Title) <u>Khanh Russo Policy Analyst</u>			
Area Code/Phone Number <u>408-535-4826</u>	E-mail <u>Khanh.Russo@sanjoseca.gov</u>		

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 476.⁰⁰ and 252.⁰⁰

Event Description: Sharks vs. Blues Date(s) 5, 19, 19
Provide Title/Explanation

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

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

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
<u>Sam Liccardo</u>	<u>1</u>	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: <u>Recognition</u>
<u>Tak Odama</u>	<u>1</u>	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: <u>Security</u>
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
<u>San Jose Promise</u>	<u>22</u>	<u>Recognition</u>

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.

K Russo Signature of Agency Head or Designee Khanh Russo Print Name Policy Analyst Title 5/15/19 (month, day, year)

Comment: _____

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

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1. Agency Name City of San Jose		San Jose City Clerk <i>OTCA</i>	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) Mayor's Office		2018 AUG 29 AM 11:25	
Designated Agency Contact (Name, Title) Christopher Ratana - Policy Analyst		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.)	
Area Code/Phone Number 408-535-4829	E-mail christopher.ratana@sanjoseca.gov	Date of Original Filing: <u>08/27/2018</u> (month, day, year)	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ \$102.00

Event Description: Monster Jam - Date(s) 09 / 01 / 18
Provide Title/ Explanation

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

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

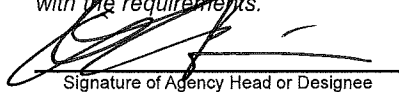
3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
Trash Punx - TheTrashPunx@gmail.com http://www.thetrashpunx.org/	24	Thank you to volunteers for hundreds of hours of volunteer service picking up trash and blight from our City.

4. Verification

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

 Signature of Agency Head or Designee
Dylan Sivar Print Name
Deputy Chief of Staff Title
08/27/18 (month, day, year)

Comment: _____

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

Agency Name

City of San Jose

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy

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

A Public Document

1. Agency Name <u>City of San Jose</u>		Date Stamp RECEIVED San Jose City Clerk OTC 24 2018 MAY 10 AM 8:40	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) <u>Office of Mayor Sam Liccardo</u>		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _____ (month, day, year)	
Designated Agency Contact (Name, Title) <u>Khanh Russo, Sr. Policy Advisor</u>			
Area Code/Phone Number <u>408.535.4800</u>	E-mail <u>The Office of Mayor Liccardo @</u>		

2. Function or Event Information sanjoseca.gov

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 329.00

Event Description: U2 Concert Date(s) 5, 8, 18
Provide Title/Explanation

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

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

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
<u>Please see attached list</u>		Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> <u>San Jose Works Donor + Partner Recognition</u>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy

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

[Signature] Jim Reed Mayor's Chief of Staff 5/9, 10
 Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: _____

Event	Date	Name of Individual (Last, First)	# of Tickets
U2 concert	5/8/2018	Liccardo, Sam (wife, Garcia-Kohl, Jessica)	2
U2 concert	5/8/2018	Trujillo, Ted (Mayor's security detail)	1
U2 concert	5/8/2018	Russo, Khanh Mayor's Sr. Policy Aide)	1
U2 concert	5/8/2018	Holguin, Ingrid (Mayor's Policy Advisor)	1
U2 concert	5/8/2018	Rademann, Jeff (Wells Fargo)	2
U2 concert	5/8/2018	Gonzalez, Raquel (Bank of America)	1
U2 concert	5/8/2018	Mahood, Matt (The Silicon Valley Organization)	1
U2 concert	5/8/2018	Cat Uong (The Silicon Valley Organization)	1
U2 concert	5/8/2018	Dalma, Gina (Silicon Valley Community Foundation)	1
U2 concert	5/8/2018	Melchor, Monique (+guest, Work2Future)	2
U2 concert	5/8/2018	Krell, Rebeka (City of San Francisco)	1

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

A Public Document

1. Agency Name <u>City of San Jose</u>		Date Stamp San Jose City Clor O R C C T 2018 JAN -3 PM 1:15	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) <u>office of Mayor Sam Liccardo</u>			
Designated Agency Contact (Name, Title) <u>Shelley Opsal - Secretary to Mayor</u>		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.)	
Area Code/Phone Number <u>408 535-3899</u>	E-mail <u>Shelley.Opsal@sanjoseca.gov</u>	Date of Original Filing: _____ (month, day, year)	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ \$ 63.00

Event Description: US Figure skating Date(s) 1, 3, 18
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: S.J. Sports Authority
Name of Source

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

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
<u>Mayor Sam Liccardo</u>	<u>3</u>	Ceremonial Role <input checked="" type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
<u>Ted Truillo (security)</u>		
<u>Jessica Garcia - Kohl (wife)</u>		
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy

4. Verification

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

Signature of Agency Head or Designee: [Signature] Print Name: Sam Liccardo Title: Mayor Date: 1/3/18
(month, day, year)

Comment: _____

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A Public Document

1. Agency Name <u>City of San Jose</u>		RECEIVED San Jose City Clerk Date Stamp <u>OTC</u> 2017 OCT 12 AM 11:44	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) <u>Office of Mayor Sam Liccardo</u>			
Designated Agency Contact (Name, Title) <u>Dylan Simon, Deputy CoS</u>		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.)	
Area Code/Phone Number <u>(408) 535-4825</u>	E-mail <u>dylan.simon@sanjoseca.gov</u>	Date of Original Filing: _____ (month, day, year)	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 225 + 86

Event Description: Sherks v. Subrier Date(s) 10, 12, 2017
Provide Title/Explanation

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

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

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
<u>Christmas in the Park</u>	<u>24</u>	<u>Recognition</u>
B. Name of Individual (Last, First)		
	Number of Ticket(s)/ Passes	Identify one of the following: Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (include address and description)		
	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy

4. Verification

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

[Signature] Sam Liccardo Mayor _____
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: _____

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

A Public Document

1. Agency Name <u>City of San Jose</u>		San Jose City Clerk Date Stamp <u>OTC</u>	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) <u>Office of Mayor Sam Liccardo</u>		2017 OCT 12 AM 11:44	
Designated Agency Contact (Name, Title) <u>Dylan Simon, Deputy CoS</u>		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.)	
Area Code/Phone Number <u>(408) 535-4825</u>	E-mail <u>dylan.simon@sanjoseca.gov</u>	Date of Original Filing: _____ (month, day, year)	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 225 \$186

Event Description: Sharks vs Flyers Date(s) 10/4/2017
Provide Title/Explanation

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

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

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
<u>San Jose Conservation Corps</u>	<u>24</u>	<u>Recognition</u>
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following: Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy

4. Verification

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

Signature of Agency Head or Designee: [Signature] Print Name: Sam Liccardo Title: Mayor (month, day, year): _____

Comment: [Signature]

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

RECEIVED
San Jose City Clerk
Date Stamp

A Public Document

1. Agency Name <u>Office of Mayor Sam Liccardo</u> Division, Department, or Region (if applicable)		2017 AUG 21 PM 2:28 otc ma	California Form 802 For Official Use Only
Designated Agency Contact (Name, Title) <u>Dylan Simon - Deputy Chief of Staff</u>			
Area Code/Phone Number <u>(408) 535-4825</u>	E-mail <u>dylan.simon@sanjoseca.gov</u>	<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _____ (month, day, year)	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 115 & 50

Event Description: Marvel Universe Live Date(s) 8, 19, 2017
Provide Title/Explanation

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

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

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
<u>McKinley Neighborhood Assn</u>	<u>24</u>	<u>Recognition</u>
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following: Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy

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.

Dylan Simon Dylan Simon Deputy Chief of Staff
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: _____

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

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1. Agency Name <u>City of San José</u>		RECEIVED Date Stamp San José City Clerk <u>Rev ore</u> 2017 MAR -3 AM 9:33	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) <u>Office of Mayor San Licardo</u>			
Designated Agency Contact (Name, Title) <u>Dylan Simon, Policy Analyst</u>			
Area Code/Phone Number <u>408 535 4900</u>	E-mail <u>dylan.simon@sanjoseca.gov</u>	<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.)	
		Date of Original Filing: _____ (month, day, year)	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 50

Event Description: Disney or Ice Date(s) _____
Provide Title/Explanation

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

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

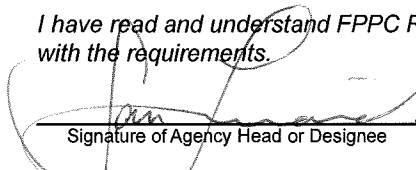
3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
<u>Red Cross (for Flood Victims)</u>	<u>38</u>	<u>Recognition</u>
B. Name of Individual (Last, First)		
	Number of Ticket(s)/ Passes	Identify one of the following: Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (include address and description)		
	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy

4. Verification

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

 Signature of Agency Head or Designee	<u>Sam Licardo</u> Print Name	<u>Mayor</u> Title	<u>2/26/2017</u> (month, day, year)
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Comment: _____

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

RECEIVED A Public Document

1. Agency Name City of San Jose		Date Stamp 2016 OCT 12 PM 1:27 SP OTC	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) Office of Mayor Sam Liccardo			
Designated Agency Contact (Name, Title) Dylan Simon		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.)	
Area Code/Phone Number 408-535-4800	E-mail dylan.simon@sanjoseca.gov	Date of Original Filing: _____ (month, day, year)	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ \$222, \$86

Event Description: SHARKS VS. KINGS Date(s) 10 / 12 / 16
Provide Title/Explanation

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

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

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
San Jose Support Services for Veteran Families (SSVF) Agencies	24	Recognition
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy

4. Verification

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

Signature of Agency Head or Designee: [Signature] Print Name: Sam Liccardo Title: Mayor Date: 10-12-16
(month, day, year)

Comment: _____

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

RECEIVED A Public Document

1. Agency Name <u>City of San José</u>		Date Stamp <u>2016 AUG 25 PM 3:47</u> <u>SP OTC</u>	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) <u>Office of Mayor Sam Liccardo</u>			
Designated Agency Contact (Name, Title) <u>Dylan Simon, Policy Analyst</u>			
Area Code/Phone Number <u>408 535 4825</u>	E-mail <u>dylan.simon@sanjoseca.gov</u>	<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.)	
		Date of Original Filing: _____ (month, day, year)	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 57 and \$30

Event Description: Ringling Bros. Circus Date(s) 8/27/16
Provide Title/Explanation

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

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

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
<u>McKinley Bonita Neighborhood Assn.</u>	<u>24</u>	<u>Recognition of service</u>
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
<u>Lerme, David</u>		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy

4. Verification

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

Signature of Agency Head or Designee _____ Print Name _____ Title _____ (month, day, year) _____

Comment: _____

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

RECEIVED

A Public Document

1. Agency Name <u>CITY OF SAN JOSE</u>		Date Stamp <u>WT OTC</u>	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) <u>OFFICE OF MAYOR SAM LICCARDO</u>		2016 JUN -6 PM 4:05	
Designated Agency Contact (Name, Title) <u>DYLAN SIMON, POLICY ANALYST</u>		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.)	
Area Code/Phone Number <u>408 555 4825</u>	E-mail <u>dylan.simon@sanjoseca.gov</u>	Date of Original Filing: _____ (month, day, year)	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 667 and 329

Event Description: SHARKS STANLEY CUP 6/4 Date(s) 6/6/16
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: SAN JOSE ARENA AUTHORITY
Name of Source

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

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
<u>LICCARDO, SAM</u>	<u>1</u>	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> <u>Recognition</u>
<u>SANCHEZ, BRANDON</u>	<u>1</u>	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> <u>Security</u>
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
<u>DESTINATION: HOME</u>	<u>2</u>	<u>Recognition</u>

4. Verification

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

Signature of Agency Head or Designee: SAM LICCARDO Print Name: MAYOR Title: 6/6/16
(month, day, year)

Comment: [Signature]

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

RECEIVED
San Jose City Clerk
Date Stamp

A Public Document

1. Agency Name CITY OF SAN JOSE Division, Department, or Region (if applicable)		2016 MAY -5 PM 3:40 SP OTC	California Form 802 For Official Use Only
OFFICE OF MAYOR SAM LICCARDO Designated Agency Contact (Name, Title)			
Dylan Simon, Policy Analyst Area Code/Phone Number	E-mail dylan.simon@sanjoseca.gov	<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _____ (month, day, year)	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 148.00

Event Description: Stars on Ice Date(s) 05/08/2016
Provide Title/Explanation

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

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

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>if checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>if checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
<u>American Cancer Society</u>	<u>24</u>	<u>Recognition</u>

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.

_____ Sam Liccardo _____ Mayor _____
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: _____

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

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A Public Document

1. Agency Name CITY OF SAN JOSE		RECEIVED SAN JOSE CITY CLERK Date Stamp 2015 OCT 14 AM 10:44 C. Le	California Form 802 For Official Use Only
Division, Department, or Region (If Applicable) OFFICE OF Mayor SAM Liccardo			
Designated Agency Contact (Name, Title) Maggie Le, ASSISTANT CHIEF OF STAFF		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
Area Code/Phone Number (408) 535-4800	E-mail margaret.le@sanjoseca.gov	Date of Original Filing: _____ (Month, Day, Year)	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 222.00

Event Description SHARKS vs. ANAHEIM DUCKS Date(s) 10 / 10 / 2015
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: SAN JOSE ARENA AUTHORITY
Name of Source

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


3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/Pass(es)	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below:
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
DOWNTOWN STREETS TEAM	24	recognition

4. Verification

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



 Signature of Agency Head or Designee

 sam Liccardo
 Print Name

 Mayor
 Title

 (Month, Day, Year)

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

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A Public Document

1. Agency Name CITY OF SAN JOSE		San Jose City Clerk Date Stamp 2015 OCT 14 AM 10:44 <i>COPY etc</i>	California Form 802 For Official Use Only
Division, Department, or Region (If Applicable) OFFICE OF MAYOR SAM LICCARDI			
Designated Agency Contact (Name, Title) Maggie Le, ASSISTANT CHIEF OF STAFF			
Area Code/Phone Number (408) 535-4800	E-mail margaret.le@sanjoseca.gov	<input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: _____ (Month, Day, Year)	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 502⁰⁰

Event Description GOLDEN STATE WARRIORS GAME Date(s) 10 / 05 / 2015
Provide Title/Explanation

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

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

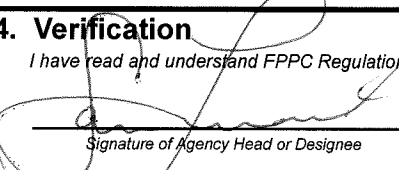
3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual <small>(Last, First)</small>	Number of Ticket(s)/Pass(es)	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization <small>(include address and description)</small>	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
<u>SHOP WITH A COP</u>	<u>16</u>	<u>Recognition</u>

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.

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

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

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San Jose City Clerk A Public Document

1. Agency Name <u>CITY OF SAN JOSE</u>		Date Stamp <u>2015 AUG 12 PM 12: 30</u>	California Form 802 For Official Use Only
Division, Department, or Region (If Applicable) <u>OFFICE OF Mayor Sam Liccardo</u>			
Designated Agency Contact (Name, Title) <u>Maggie Le, ASSISTANT CHIEF OF STAFF</u>			
Area Code/Phone Number <u>(408) 535-4600</u>	E-mail <u>margaret.le@sanjoseca.gov</u>	<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
		Date of Original Filing: _____ (Month, Day, Year)	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 82.⁰⁰

Event Description SABER CATS VS. ARIZONA RATTIERS Date(s) 07 / 31 / 15
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: SAN JOSE ARENA AUTHORITY
Name of Source

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

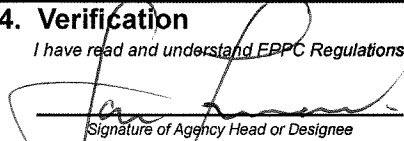
3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/Pass(es)	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
<u>DUMPSTER DAY VOLUNTEERS</u>	<u>24</u>	<u>recognition</u>

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.

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

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

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San Jose City Clerk **A Public Document**

1. Agency Name City of San Jose		Date Stamp 2013 JAN 31 PM 2:10	California Form 802 For Official Use Only
Division, Department, or Region (If Applicable) Office of Mayor Chuck Reed			
Designated Agency Contact (Name, Title) Sara Wright, Agenda Services Manager		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
Area Code/Phone Number 408-535-4800	E-mail mayoremail@sanjoseca.gov	Date of Original Filing: 01/29/13 (Month, Day, Year)	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ Suite:\$192,SRO:\$95

Event Description Sharks Hockey/Econ Devo Outreach Date(s) 01 / 24 / 13
Provide Title/Explanation

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

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

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
Please see attached sheet	25	
B. Name of Individual (Last, First)		
" "		Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
C. Name of Outside Organization (include address and description)		
" "		

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.

Chuck Reed CHUCK REED Mayor 1/30/13
Signature of Agency Head or Designee Print Name Title (Month, Day, Year)

Comment: _____

Business Appreciation Event, 1/24/13

A. Name of Agency, Department, or Unit	# of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy
Office of Mayor Chuck Reed	1	Economic development outreach (Council Policy Manual 9-11)
Police Department	1	Economic development outreach (Council Policy Manual 9-11)
Office of Economic Development	3	Economic development outreach (Council Policy Manual 9-11)
Planning, Building, and Code Enforcement	2	Economic development outreach (Council Policy Manual 9-11)
Information Technology	1	Economic development outreach (Council Policy Manual 9-11)
B. Name of Individual (Last, First)		
	# of Ticket(s)/ Pass(es)	Identify one of the following:
Reed, Chuck	2	Other (Elected Official; Mayor, City of San José)
C. Name of Outside Organization (include address and description)		
	# of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy
County of Santa Clara (Asset and Economic Development), 70 West Hedding Street, East Wing, 7th Floor, San Jose, CA 95110	1	Economic development outreach (Council Policy Manual 9-11)
State of California (Business Development), 1400 10th Street, 2nd Floor, Sacramento, CA 95814	1	Economic development outreach (Council Policy Manual 9-11)
Samsung, 75 West Plumeria Drive, San Jose, CA 95134 (Information Systems America (SISA) R&D Center)	13	Economic development outreach (Council Policy Manual 9-11)

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

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 San Jose City Clerk

A Public Document

1. Agency Name CITY OF SAN JOSE		Date Stamp 2014 FEB -6 PM 4:07	California Form 802 For Official Use Only
Division, Department, or Region (If Applicable) MAYOR'S OFFICE			
Designated Agency Contact (Name, Title) JEREMY M. GOLDBERG DEP. CHIEF OF STAFF - CIVIC INNOVATION		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
Area Code/Phone Number 408-535-4800	E-mail mayoremail@sanjoseca.gov	Date of Original Filing: _____ (Month, Day, Year)	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 192.00

Event Description SILICON VALLEY TALENT PARTNERSHIP APPRECIATION EVENT Date(s) 01, 27, 2014

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

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

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/Pass(es)	Identify one of the following:
REED, CHUCK (CITY OF SAN JOSE, MAYOR'S OFFICE)	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: RECOGNITION FOR DIRECT INVOLVEMENT IN CITY-RELATED PROJECTS/PROGRAMS
TRUJILLO, TED (CITY OF SAN JOSE, MAYOR'S OFFICE)	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: RECOGNITION FOR DIRECT INVOLVEMENT IN CITY-RELATED PROJECTS/PROGRAMS
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy

4. Verification

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

Chuck Reed Signature of Agency Head or Designee CHUCK REED Print Name Mayer Title 2/6/2014 (Month, Day, Year)

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

Agency Name

CITY OF SAN JOSE - OFFICE OF THE MAYOR

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Pass(es)	Identify one of the following:
GOLDBERG, JENNIFER (CITY OF SAN JOSE, MAYOR'S OFFICE)	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> RECOGNITION FOR DIRECT INVOLVEMENT IN CITY-RELATED PROJECTS/PROGRAMS
SHIKADA, ED (CITY OF SAN JOSE OFFICE OF CIM MANAGER)	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> RECOGNITION FOR DIRECT INVOLVEMENT IN CITY-RELATED PROJECTS/PROGRAMS
NADESH, KIM (CITY OF SAN JOSE OFFICE OF ECONOMIC DEV)	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> RECOGNITION FOR DIRECT INVOLVEMENT IN CITY-RELATED PROJECTS/PROGRAMS
SAMMETA, VIJAY (CITY OF SAN JOSE OFFICE OF IT)	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> RECOGNITION FOR DIRECT INVOLVEMENT IN CITY-RELATED PROJECTS/PROGRAMS
C. Name of Outside Organization (Include address and description)	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy

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

CITY OF SAN JOSE - OFFICE OF THE MAYOR
 Agency Name

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Pass(es)	Identify one of the following:
EDMONDS-MADES, JULIE (CITY OF SAN JOSE) PRNS	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> RECOGNITION FOR DIRECT INVOLVEMENT IN CITY RELATED PROJECTS/PROGRAMS
GUARDINO, CARL (SVLG)	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> RECOGNITION FOR DIRECT INVOLVEMENT IN CITY RELATED PROJECTS/PROGRAMS
BEYER, CASEY (SVLG)	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> RECOGNITION FOR DIRECT INVOLVEMENT IN CITY RELATED PROJECTS/PROGRAMS
MENDONCA, LENNY (MCKINSEY? CO)	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> RECOGNITION FOR DIRECT INVOLVEMENT IN CITY RELATED PROJECTS/PROGRAMS
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy

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

City of SAN JOSE - OFFICE OF THE MAYOR
 Agency Name

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy

B. Name of Individual <small>(Last, First)</small>	Number of Ticket(s)/ Pass(es)	Identify one of the following:
MANSRY, ALEX (MCKINSEY'S CO)	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> RECOGNITION FOR DIRECT INVOLVEMENT IN CITY-RELATED PROJECTS / PROGRAMS
INGRAM, MBRINAVINI (CISCO)	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> RECOGNITION FOR DIRECT INVOLVEMENT IN CITY-RELATED PROJECTS / PROGRAMS
LIPSCOMB, MARK (STRYKER)	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> RECOGNITION FOR DIRECT INVOLVEMENT IN CITY-RELATED PROJECTS / PROGRAMS
PIERCE, ANDY (STRYKER)	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> RECOGNITION FOR DIRECT INVOLVEMENT IN CITY-RELATED PROJECTS / PROGRAMS

C. Name of Outside Organization <small>(include address and description)</small>	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy

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

CITY OF SAN JOSE - OFFICE OF THE MAYOR

Agency Name

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy

B. Name of Individual (Last, First)	Number of Ticket(s)/ Pass(es)	Identify one of the following:
GUIO, LAURA (IBM)	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> RECOGNITION FOR DIRECT INVOLVEMENT IN CITY-RELATED PROJECTS/PROGRAMS
GUIO, MICHAEL	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> RECOGNITION FOR DIRECT INVOLVEMENT IN CITY-RELATED PROJECTS/PROGRAMS
ANDREWS, ANNE (PNC)	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> RECOGNITION FOR DIRECT INVOLVEMENT IN CITY-RELATED PROJECTS/PROGRAMS
VENNENITZ-PIERCE, JULIE (eBay)	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> RECOGNITION FOR DIRECT INVOLVEMENT IN CITY-RELATED PROJECTS/PROGRAMS

C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy

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

CITY OF SAN JOSE - OFFICE OF THE MAYOR
 Agency Name

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy

B. Name of Individual <small>(Last, First)</small>	Number of Ticket(s)/ Pass(es)	Identify one of the following:
KLEINBERG, JUDY (KNIGHT FOUNDATION)	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> RECOGNITION FOR DIRECT INVOLVEMENT IN CITY-RELATED PROJECTS / PROGRAMS
HERBERT, GARRETT (DELOITTE)	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> RECOGNITION FOR DIRECT INVOLVEMENT IN CITY-RELATED PROJECTS / PROGRAMS
GUTIERREZ, LEMMIES (COMCAST)	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> RECOGNITION FOR DIRECT INVOLVEMENT IN CITY-RELATED PROJECTS / PROGRAMS
NOBLE, JONATHAN (MICROSOFT)	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> RECOGNITION FOR DIRECT INVOLVEMENT IN CITY RELATED PROJECTS / PROGRAMS

C. Name of Outside Organization <small>(include address and description)</small>	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy

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

CITY OF SAN JOSE - OFFICE OF THE MAYOR
Agency Name

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual <small>(Last, First)</small>	Number of Ticket(s)/ Pass(es)	Identify one of the following:
MARSHALL, COREY (SPLUNK)	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> RECOGNITION FOR PUBLIC INVOLVEMENT IN CITY-RELATED PROJECTS/PROGRAMS
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization <small>(include address and description)</small>	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy