A Public Document Ceremonial Role Events and Ticket/Pass DistributionsRECEIVED San Jose Citypatel Stamp California 1. Agency Name Form City of San Jose For Official Use Only -9 PM 4: 08 Division, Department, or Region (if applicable) Office of the City Attorney Designated Agency Contact (Name, Title) Kim Jackson, Legal Services Administrator Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: . kim.jackson@sanjoseca.gov 408.535.1933 (month, day, year) 2. Function or Event Information \$195.95 Face Value of Each Ticket/Pass \$. Does the agency have a ticket policy? Yes No 🗆 Event Description: Duran Duran Concert Date(s) _05 23 28 Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes No 🗌 Was ticket distribution made at the behest 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)/ Passes Number Identify one of the following: Name of Individual B. of Ticket(s)/ (Last, First) Passes Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below. 2 Phan, Johnny Employee Recognition-Suite Income Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below: 2 Lecomte, Brandi Employee Recognition-Suite Number Describe the public purpose made pursuant to the agency's policy Name of Outside Organization of Ticket(s)/ C. (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 Legal Services Administrator 06/5/2023 Kim Jackson (month, day, year) Title Print Name Comment:

Agency Report of:



Recipients						
• Use Se	ection A to identify the agency's department or unit	. • Use Section B to id	dentify an individual. Use Section C to Identify an outside organization.			
Α.	Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy			
В.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:			
			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:			
Day,	Cameron	1	Employee Recognition- Suite			
			Ceremonial Role Other Location Income If checking "Ceremonial Role" or "Other" describe below:			
Grim	nme, Catherine	1	Employee Recognition- Suite			
			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:			
Man	jares Duffy, Joy	2	Employee Recognition- Suite			
<u></u>			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:			
Doug	glas-Fry, Joan	1	Employee Recognition- Suite			
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			

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Recipients	• Use Section B to ide	entify 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	
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Paragon Spanish Control Spanis	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:
Zazueta, Daniel	R ever 133	Employee Recognition- Suite
The state of the s	AND SET	Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:
Yuan, Diana	7 13	Employee Recognition- Suite
Tuesday - Dawney	resident of	Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:
Reak-Zeljak, Cristin	2	Employee Recognition- Suite
		Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:
Nasseri, Tina	2	Employee Recognition- Suite
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

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Recipients		
	nit. • Use Section B to i	dentify 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 II Income
Burgueno-Tapia, Rosalia	1	Employee Recognition- Suite
		Ceremonial Role Other Income
Forsythe, Deanna	1	Employee Recognition- Suite
		Ceremonial Role Other Income Income Inchecking "Ceremonial Role" or "Other" describe below:
Washington, LaVerne	1	Employee Recognition- Suite
		Ceremonial Role Other Income Income Inchecking "Ceremonial Role" or "Other" describe below:
Delaney, Steven	2	Employee Recognition- Suite
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
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Rec	Recipients							
	. =	it. •Use Section B to i	dentify an individual. Use Section C to identify an outside organization.					
Α.	Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy					
<u></u> В.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:					
			Ceremonial Role Other Income					
Ward	d, Brian	1	Employee Recognition- Suite					
			Ceremonial Role Other III Income If checking "Ceremonial Role" or "Other" describe below:					
Lask	owska, Margo	1	Employee Recognition- Suite					
			Ceremonial Role Other Income					
Chaf	fe, Terra	2	Employee Recognition- Suite					
			Ceremonial Role Other 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					
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Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California San Jose City Clerk **Form** CITY OF SAN JOSE DA KIM For Official Use Only Division, Department, or Region (if applicable) 2019 JUN 20 PM 3: 10 OFFICE OF THE CITY ATTORNEY Designated Agency Contact (Name, Title) KIM JACKSON, LEGAL SERVICES ADMINISTRATOR Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: 408-535-1933 KIM.JACKSON@SANJOSECA.GOVE (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 299.95 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: JENNIFER LOPEZ CONCERT 13 6 / Date(s) _ 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 of Ticket(s)/ **Passes** Number Name of Individual В. of Ticket(s)/ Identify one of the following: (Last, First) Passes Ceremonial Role Income ... FISHER, KEVIN If checking "Ceremonial Role" or "Other" describe below: 1 **EMPLOYEE RECOGNITION-SUITE** Ceremonial Role Other 🔀 Income | SANDOVAL, AMPARO If checking "Ceremonial Role" or "Other" describe below: 1 EMPLOYEE RECOGNITION-SUITE 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. KIM JACKSON LEGAL SVCS ADMIN 6/19/2019 Signature of Agency Head or Designee Print Name (month, day, year)

Agency Report of:

Comment:



Agency Name					
3. Recipients		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:			
MOHAMMADI, COURTNEY	1	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below: EMPLOYEE RECOGNITION- SUITE			
LARA, STEPHANIE	1	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below: EMPLOYEE RECOGNITION- SUITE			
MARTINEZ, VERONICA	1	Ceremonial Role Other Image Income Income If checking "Ceremonial Role" or "Other" describe below: EMPLOYEE RECOGNITION- SUITE			
VALIENTE, SUSANA	1	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below: EMPLOYEE RECOGNITION- SUITE			
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			
	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) MOHAMMADI, COURTNEY LARA, STEPHANIE MARTINEZ, VERONICA VALIENTE, SUSANA	Recipients * Use Section A to identify the agency's department or unit. * Use Section B to A. Name of Agency, Department or Unit Number of Ticket(s)/ Passes B. Name of Individual (Last, First) Number of Ticket(s)/ Passes MOHAMMADI, COURTNEY 1 LARA, STEPHANIE 1 MARTINEZ, VERONICA 1 VALIENTE, SUSANA 1 Number of Ticket(s)/ Rasses 1 Number			



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:			
SILVA, ARLENE	1	Ceremonial Role Other Income Income Income EMPLOYEE RECOGNITION- SUITE			
FIELDS, ELENA	1	Ceremonial Role Other Income Income Income EMPLOYEE RECOGNITION- SUITE			
WALTERS, KATHERINE	1	Ceremonial Role Other Image Income In			
NASSERI, TINA	1	Ceremonial Role Other Income 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			



Recipients • Use Section A to identify the agency's department or unit.	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:			
LAMM, KARA	1	Ceremonial Role Other Income I			
WASHINGTON, LA VERNE	1	Ceremonial Role Other Memorial Income			
LASKOWSKA, MARGO	1	Ceremonial Role Other Image Income In			
ACOSTA, NORMA	1	Ceremonial Role Other Income Income Income Elemptoyee RECOGNITION- SUITE			
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			
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	gency Name		
CIT B.	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
		i	
	B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
	TODOROV, VERA	1	Ceremonial Role Other Mescribe Income If checking "Ceremonial Role" or "Other" describe below: EMPLOYEE RECOGNITION- SUITE
			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 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
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Ceremonial Role Events and Tic 1. Agency Name		Şe∏.	Date Stamp	A Public Document
CITY OF SAN JOSE		2010	in pa	Form 802
Division, Department, or Region (If Applicable)	Z013 JA	131 PM 3: 43	For Official Use Only
OFFICE OF THE CITY ATTORNEY		-		
Designated Agency Contact (Name, Title)				
KIM JACKSON, LEGAL SERVICES ADM	INISTRATO	OR		
Area Code/Phone Number E-mail				provide explanation in Part 3.)
	UN@SANJ	OSECA.GOV	Date of Original Filing:	(Month, Day, Year)
2. Function or Event Information	_	_ 5		\$225suite/\$82ticket
	Yes⊠ No	· -	of Each Ticket/Pass \$ _	
Event Description SHARKS V PITTSBURG	⊃H ———————— anation	Date(s)	, 15 , 19	
	Yes⊠ No	. ☐ If no:		
Honor(a)// assigns/provided by agency:	res 🔼 🛝	и но. <u>— — — — — — — — — — — — — — — — — — —</u>	Name of So	urce
Was ticket distribution made at the behest of agency official?	No ☐ Yes	If yes:	Official's Name (Last First)
 Recipients Use Section A to identify the agency's department or u 	ınit. • Use Se	ection B to identify an individu	ıal. • Use Section C to iden	tify an outside organization.
A. Name of Agency, Department or Unit	Number of Ticket(s)/	Describe the pub	ilic purpose made pursuan	to the agency's policy
	Pass(es)	120		
B. Name of Individual	Number of		Identify one of the follow	
B. Name of Individual (Last, First)	Number of Ticket(s)/ Pass(es)		Identify one of the follow	ing:
(Last, First)	Ticket(s)/		Other 🗵	ing:
B. Name of Individual (Last, First) MORAN, EDUARDO	Ticket(s)/		Other 🗵	
(Last, First)	Ticket(s)/ Pass(es)	If checking "Ceremon	Other 🗵	
(Last, First) MORAN, EDUARDO	Ticket(s)/ Pass(es)	If checking "Ceremon. EMPLOYEE RECC	Other	
(Last, First)	Ticket(s)/ Pass(es)	If checking "Ceremon. EMPLOYEE RECC Ceremonial Role If checking "Ceremonial	Other Ideal Role" or "Other" describe below: OGNITION- SUITE	Income
MORAN, EDUARDO	Ticket(s)/ Pass(es)	If checking "Ceremon. EMPLOYEE RECC Ceremonial Role If checking "Ceremonial	Other Manager of "Other" describe below: OGNITION- SUITE Other Manager of "Other" describe below:	Income
(Last, First) MORAN, EDUARDO SANDOVAL, AMPARO Name of Outside Organization	Ticket(s)/ Pass(es)	If checking "Ceremon. EMPLOYEE RECC Ceremonial Role If checking "Ceremonial EMPLOYEE RECO	Other Market of the Company of the C	Income I
MORAN, EDUARDO SANDOVAL, AMPARO	Ticket(s)/ Pass(es) 2 Number of	If checking "Ceremon. EMPLOYEE RECC Ceremonial Role If checking "Ceremonial EMPLOYEE RECO	Other Manager of "Other" describe below: OGNITION- SUITE Other Manager of "Other" describe below:	Income I
(Last, First) MORAN, EDUARDO SANDOVAL, AMPARO Name of Outside Organization	Ticket(s)/ Pass(es) 2 Number of Ticket(s)/	If checking "Ceremon. EMPLOYEE RECC Ceremonial Role If checking "Ceremonial EMPLOYEE RECO	Other Market of the Company of the C	Income I
(Last, First) MORAN, EDUARDO SANDOVAL, AMPARO Name of Outside Organization	Ticket(s)/ Pass(es) 2 Number of Ticket(s)/	If checking "Ceremon. EMPLOYEE RECC Ceremonial Role If checking "Ceremonial EMPLOYEE RECO	Other Market of the Company of the C	Income I
(Last, First) MORAN, EDUARDO SANDOVAL, AMPARO Name of Outside Organization	Ticket(s)/ Pass(es) 2 Number of Ticket(s)/	If checking "Ceremon. EMPLOYEE RECC Ceremonial Role If checking "Ceremonial EMPLOYEE RECO	Other Market of the Company of the C	Income I
(Last, First) MORAN, EDUARDO SANDOVAL, AMPARO Name of Outside Organization (include address and description)	Ticket(s)/ Pass(es) 2 Number of Ticket(s)/	If checking "Ceremon. EMPLOYEE RECC Ceremonial Role If checking "Ceremonial EMPLOYEE RECO	Other Market of the Company of the C	Income I
(Last, First) MORAN, EDUARDO SANDOVAL, AMPARO Name of Outside Organization	Ticket(s)/ Pass(es) 2 Number of Ticket(s)/ Pass(es)	If checking "Ceremon. EMPLOYEE RECO Ceremonial Role If checking "Ceremoni EMPLOYEE RECO Describe the pub	Other In Annual Control of the Cont	Income In
MORAN, EDUARDO SANDOVAL, AMPARO C. Name of Outside Organization (include address and description) Verification	Ticket(s)/ Pass(es) 2 Number of Ticket(s)/ Pass(es)	If checking "Ceremon, EMPLOYEE RECC Ceremonial Role If checking "Ceremon, EMPLOYEE RECO Describe the pub	Other Dela Role" or "Other" describe below: OGNITION- SUITE Other Dela Role" or "Other" describe below: OGNITION- TICKETS OGNITION- TICKETS OF purpose made pursuant	Income In
MORAN, EDUARDO SANDOVAL, AMPARO C. Name of Outside Organization (include address and description) Verification	Ticket(s)/ Pass(es) 2 Number of Ticket(s)/ Pass(es)	If checking "Ceremon, EMPLOYEE RECO Ceremonial Role If checking "Ceremoni EMPLOYEE RECO Describe the pub partition that the distribution set for the control of the cont	Other In Annual Control of the Cont	Income In



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	Number of Ticket(s)/ Pass(es)	Identify one of the following:					
	HILL, EGAN	1	Ceremonial Role Other M Income					
•	CHOW, YUE-HAN	1	Ceremonial Role Other Income [If checking "Ceremonial Role" or "Other" describe below: EMPLOYEE RECOGNITION- SUITE					
•	LEE, KEVIN	2	Ceremonial Role Other I Income I Income I Income I Income I If checking "Ceremonial Role" or "Other" describe below: EMPLOYEE RECOGNITION- SUITE					
•	GILLESPIE, ROXANNE	2	Ceremonial Role Other M Income					
Table Co. The Party of Control of Co.	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					
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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 (Lest, First)	Number of Ticket(s)/ Pass(es)	Identify one of the following:					
	Tsongtaatarii, Rosa	1	Ceremonial Role Other Income Income Income If checking "Ceremonial Role" or "Other" describe below: EMPLOYEE RECOGNITION- SUITE					
	Schwarzbach, Glenn	1	Ceremonial Role Other Income Income Income If checking "Ceremonial Role" or "Other" describe below: EMPLOYEE RECOGNITION- SUITE					
	WEBSTER, NADIA	. 1	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below: EMPLOYEE RECOGNITION- SUITE					
•	ACOSTA, NORMA	2	Ceremonial Role Other Management Income Income If checking "Ceremonial Role" or "Other" describe below: EMPLOYEE RECOGNITION- TICKETS					
	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					
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Recipients								
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	Number of Ticket(s)/ Pass(es)	Identify one of the following:						
LARA, STEPHANIE	1	Ceremonial Role Other Income Income Income If checking "Ceremonial Role" or "Other" describe below: EMPLOYEE RECOGNITION- SUITE						
Mohammadi, Courtney	2	Ceremonial Role Other IM Income Income If checking "Ceremonial Role" or "Other" describe below: EMPLOYEE RECOGNITION- SUITE						
O'KEEFE, JOAN	2	Ceremonial Role Other Income Income						
NIELSEN, CHRISTOPHER	2	Ceremonial Role Other M Income						
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						



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						
			·						
`	Name of Individual	Number of Ticket(s)/ Pass(es)	Identify one of the following:						
	NGUYEN, JULIE	1	Ceremonial Role Other Income Income						
	KLIMCZAK, WESLEY	1	Ceremonial Role Other Income Income						
			Ceremonial Role Other Income						
			Ceremonial Role Other Income Income						
	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 **A Public Document** 1. Agency Name Date Stamp California **Form** City of San Jose OTCH Division, Department, or Region (if applicable) For Official Use Only Office of the City Attorney Designated Agency Contact (Name, Title) Kim Jackson, Legal Services Administrator Amendment (Must Provide Explanation in Part 3.) **Area Code/Phone Number** E-mail Date of Original Filing: 408-535-1933 Kim.Jackson@sanjoseca.gov (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 194 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: Stars on Ice Date(s) 05 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 of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy Passes Number Name of Individual В. of Ticket(s)/ Identify one of the following: (Last, First) Ferrera, Arti Ceremonial Role Other X Income If checking "Ceremonial Role" or "Other" describe below: 2 Employee recognition Todorov, Vera Ceremonial Role Other X Income ___ If checking "Ceremonial Role" or "Other" describe below: 2 Employee recognition 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 a	bove, is in accordance
with the requirements				

106 Kacker	Kim Jackson	Legal Services Administrator	05/14/18
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)
Comment:			

Office of the City Attorney Designated Agency Contact (Name, Title) Ed Moran, Assistant City Attorney Area Code/Phone Number E-mail Ed. Moran@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 \$ 90 Event Description: Cirque Du Soleil Crystal Date(s) 03 31 18 / / Frovide Title/Explanation Pawer of Source If yes: Official's Name (Last, First) Was ticket distribution made at the behest Yes No If no: Name of Source If yes: Official's Name (Last, First) A. Name of Agency, Department or Unit Number of Ticket(s)/ Passes Describe the public purpose made pursuant to the agency's B. Name of Individual (Last, First) Passes Ceremonala Role Other Employee Recognition Employee Recognition Ceremonala Role Other Employee Recognition Employee Recognition Employee Recognition Official Role Other Employee Recognition A. Name of Individual Ceremonala Role Other Employee Recognition Employee Recognition Official Role Other O		cy Report of: nonial Role Even	ts and Ticket/P	ass Distr	ibutions	RECEIVED	A Publi	c Documer
Division, Department, or Region (If applicable) Office of the City Attorney Designated Agency Contact (Name, Title) Ed Moran, Assistant City Attorney Area Code/Phone Number Area Code/Phone Number E-mail 408-535-1900 Ed. Moran@sanjoseca.gov Date of Original Filing: Amendment (Must Provide Explanation in Path 408-535-1900 Date of Original Filing: (month, day, year) Date of Original Filing: (month, day, year) Provide Explanation in Path 408-535-1900 Date of Original Filing: (month, day, year) Date of Original Filing: (month, day, year) Provide Explanation in Path 508-535-1900 Date of Original Filing: (month, day, year) Date of Original Filing:	I. Age	ency Name			3an.	OSO (Date Stamp		
Office of the City Attorney Designated Agency Contact (Name, Title) Ed Moran, Assistant City Attorney Area Code/Phone Number E-mail	City	of San Jose				OTCA		
Office of the City Attorney Designated Agency Contact (Name, Title) Ed Moran, Assistant City Attorney Area Code/Phone Number E-mail	Divisi	sion, Department, or Reg	ion (if applicable)		2018 AF	R -2' PM 3: 0)9 F	or Official Use Only
Arnendment (Must Provide Explanation in Pa Arnendment (Must Provide Explanation in Pa Annendment (Must Provide Explanation Date of Original Filling:	Offic	ce of the City Attorney			601014			
Area Code/Phone Number 408-535-1900	Desig	gnated Agency Contact ((Name, Title)			1		
Area Code/Phone Number	Ed M	Moran, Assistant City Att	torney			Amendment /	Must Provide Eve	Innation in Bort 2)
2. Function or Event Information Does the agency have a ticket policy? Yes \(\) No \(\) Face Value of Each Ticket/Pass \(\) 90 Event Description: Cirque Du Soleil Crystal 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: 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 of Ticket(s)/ Passes B. Name of Agency, Department or Unit Online Individual (Last, First) Describe the public purpose made pursuant to the agency's employee Recognition Number of Ticket(s)/ Passes Ferrera, Arti 2 Ceremonial Role \(\) Other \(\) Identify describe below: Employee Recognition C. Name of Outside Organization of Ticket(s)/ Describe the public purpose made pursuant to the agency's employee Recognition Number of Ticket(s)/ Describe the public purpose made pursuant to the agency's employee Recognition Number of Ticket(s)/ Describe the public purpose made pursuant to the agency's employee Recognition	Area	Code/Phone Number	E-mail		-1	Amendment	wusi riovide Exp	ialiauoli ili Falt 3.)
Does the agency have a ticket policy? Yes \(\) No \(\) Face Value of Each Ticket/Pass \(\) \(\) \(\) Date(s) \(\) \(\) 3 \(\) 31 \(\) 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 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 organiza A. Name of Agency, Department or Unit \(\) Number of Ticket(s)/Passes B. Name of Individual (Last, First) \(\) Describe the public purpose made pursuant to the agency's Employee Recognition Murtha, Thomas 2 \(\) Ceremonial Role \(\) Other \(\) If the classing *Ceremonial Role \(\) Other \(\) If the classing *Ceremonial Role \(\) Other \(\) Employee Recognition C. Name of Outside Organization of Ticket(s)/ Individual (Individual to the agency's describe the public purpose made pursuant to the agency's Employee Recognition of Ticket(s)/ Individual (Individual to the agency's describe the public purpose made pursuant to the agency's Employee Recognition of Ticket(s)/ Individual (Individual to the agency's describe the public purpose made pursuant to the agency's Employee Recognition of Ticket(s)/ Individual (Individual to the agency's describe the public purpose made pursuant to the agency's Describe the public purpose made pursuant to the agency's Describe the public purpose made pursuant to the agency's Describe the public purpose made pursuant to the agency's Describe the public purpose made pursuant to the agency's Describe the public purpose made pursuant to the agency's Describe the public purpose made pursuant to the agency's Describe the public purpose made pursuant to the agency's Describe the public purpose made pursuant to the agency's Describe the public purpose made pursuant to the agency's Describe the public purpose made pursuant to the agency's Describ	408-	-535-1900	Ed.Moran@sanjos	eca.gov		Date of Original F	iling:(month	, day, year)
Event Description: Cirque Du Soleil Crystal 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: of agency official? 3. Recipients Use Section A to identify the agency's department or unit. Use Section B to identify an individual. A. Name of Agency, Department or Unit Number of Ticket(s)/ Passes Perrera, Arti Provide Titlet(s)/ Passes Ceremonial Role Other Section Countries and section of the following: Employee Recognition Number of Ticket(s)/ Passes Ceremonial Role Other Section Countries as a complete of the following: Employee Recognition Number of Ticket(s)/ Passes Ceremonial Role Other Section Countries as a complete of the following: Employee Recognition Number of Ticket(s)/ Passes Ceremonial Role Other Section Countries as a complete of the following: Employee Recognition Number of Ticket(s)/ Passes Ceremonial Role Other Section Countries and section countries are departed by the following: Employee Recognition Number of Ticket(s)/ Describe the public purpose made pursuant to the agency's passes of the public purpose made pursuant to the agency's passes.	2. Fun	ction or Event Infor	mation				00	
Ticket(s)/Pass(es) provided by agency? Yes No If no: Name of Source	Does	s the agency have a tick	ket policy? Yes [⊠ No 🗆 🗆	Face Value of	Each Ticket/Pass	\$ 90	
Ticket(s)/Pass(es) provided by agency? Yes \ No \ If no: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Even	nt Description: Cirque D	Ou Soleil Crystal Provide Title/ Expla		Date(s)	<u>/ 31 / 18</u>	<i>.</i>	
Was ticket distribution made at the behest Yes No Official's Name (Last, First) No Official's Name (Last, First)	Ticke	et(s)/Pass(es) provided	•		If no:	Name of Source		
of agency official? 3. Recipients • Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. A. Name of Agency, Department or Unit Number of Ticket(s) Describe the public purpose made pursuant to the agency's Passes B. Name of Individual (Last, First) Identify one of the following:	\ <i>\\</i> ae	ticket distribution made	at the behest Vac					
Vise Section A to identify the agency's department or unit. Vise Section B to identify an individual. Number of Ticket(s)/ Passes Describe the public purpose made pursuant to the agency's department or Unit Number of Ticket(s)/ Passes Number of Ticket(s)/ Passes Number of Ticket(s)/ Passes Reference, Arti			at the period: 168 [,	Official's Name (Last,	First)	
B. Name of Individual (Last, First) Ferrera, Arti Ceremonial Role Other Employee Recognition iMurtha, Thomas Ceremonial Role Other Employee Recognition Number of Ticket(s)/ Employee Recognition Number of Ticket(s)/ Describe the public purpose made pursuant to the agency's	• Use	e Section A to identify the agen		Number				
Ferrera, Arti 2 Ceremonial Role Other	В.			Number of Ticket(s)/		Identify one of	f the following:	
2 If checking "Ceremonial Role" or "Other" describe below: Employee Recognition Number of Outside Organization	Ferr	rera, Arti			If check	king "Ceremonial Role" or "Ot	_	Income
C. Name of Outside Organization of Ticket(s)/ Describe the public purpose made pursuant to the agency's	iMur	rtha, Thomas		2	If check	ring "Ceremonial Role" or "Ot		Income
	c.			of Ticket(s)/	Describe the	e public purpose mad	le pursuant to tl	ne agency's policy
	<u>, , , , , , , , , , , , , , , , , , , </u>							
4. Verification	. Verif	fication						
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in acc with the requirements.			PC Regulations 18944.	.1 and 18942.	I have verified to	hat the distribution	set forth abov	e, is in accordand
Ed Moran Assistant City Attorney April 2,		W	Ed	Moran	Д	Assistant City Atto	rney	April 2, 2018
Signature of Agency Head or Designee Print Name Title (month, da Comment:			ee Pr	int Name		Title		(month, day, year)



Agency Name v of San Jose							
ity 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	n.				
A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's po	licy				
	Number		in the				
B. Name of Individual (Last, First)	of Ticket(s)/ Passes	Identify one of the following:					
Acosta, Norma	1	Ceremonial Role Other I Inco If checking "Ceremonial Role" or "Other" describe below: Employee Recognition	ome [
Todorov, Vera	1	Ceremonial Role Other Inco	me [
· ·		Ceremonial Role . Other . Inco If checking "Ceremonial Role" or "Other" describe below:	me [
		Ceremonial Role Other Inco	me [
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's poli	icy				
	,		<u>:</u>				

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document Jos Date Stamp OT California 1. Agency Name City of San Jose For Official Use Only Division, Department, or Region (if applicable) Office of the City Attorney Designated Agency Contact (Name, Title) Ellen Donnelly, Legal Services Administrator Amendment (Must Provide Explanation in Part 3.) **Area Code/Phone Number** E-mail Date of Original Filing: . 408-535-1933 Ellen.Donnelly@sanjoseca.gov (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ \$\frac{\$225\text{-suite \$86\text{-ticket}}}{225\text{-ticket}}\$ Does the agency have a ticket policy? Yes ⊠ No □ Event Description: Sharks v. Redwings 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 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: В. of Ticket(s)/ (Last, First) Passes Ceremonial Role Other \square Income Doyle, Richard If checking "Ceremonial Role" or "Other" describe below: 2 **Employee Recognition - Suite** Ceremonial Role Income Other Moran, Ed If checking "Ceremonial Role" or "Other" describe below: Employee Recognition - Suite 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 he læguiremer Ellen Donnelly Legal Services administrator 3-13-18

Comment:



	gency Name		
ity	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:
	Nielsen, Chris	2	Ceremonial Role Other Months Income Income Inference in the Computer of the Co
	Klotz, Elizabeth	2	Ceremonial Role Other Image Income In
	Winchester, Colleen	2	Ceremonial Role Other Image Income In
	Chow, Yue-Han	2	Ceremonial Role Other Image Income In
	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 Name ty of San Jose							
Recipients	t • Use Section B to	identify an individual. • Use Section C to identify an outside organizati	on.				
A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's p					
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:					
Phan, Johnny	2	Ceremonial Role Other Melor Inc. If checking "Ceremonial Role" or "Other" describe below: Employee Recognition - Tickets	come [
		Ceremonial Role Other Inc	come [
		Ceremonial Role Other Inc	come [
		Ceremonial Role Other Inc	come [
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's po	olicy				
	1						

	gency Report of: eremonial Role Even	ts and Ticket/F	Pass Dist	ributions	RECEI	VED A	Public [Document
1.	Agency Name					ampy Us		an in the second second second
	City of San Jose				ļ		Form	
	Division, Department, or Reg	ion (if applicable)	7	7	#17 JUL 31	PH 1:	36 For Off	icial Use Only
	Office of the City Attorney							
	Designated Agency Contact	(Name, Title)			1011	M		
	Ellen Donnelly, Legal Services Administrator							
	Area Code/Phone Number	E-mail			Amendme	nt (Must Pro	ovide Explanati	on in Part 3.)
	408-535-1933	Ellen.Donnelly@sa	anjoseca.gov	,	Date of Origina	al Filing: _	(month, day	year)
2.	Function or Event Infor	mation				4.44	2.50	
	Does the agency have a tick	ket policy? Yes	⊠ No 🗆	Face Value of	Each Ticket/Pa	ass \$	9.50	-
	Event Description: Neil Diar	mond - Concert Provide Title/ Expla	anation	Date(s) <u>07</u>	<u>/ 30 / 17</u>	_		_/
	Ticket(s)/Pass(es) provided	•		lf no:	Name of Source			
	Was ticket distribution made	at the behest Ves		If yes:				_
	of agency official?	163		,	Official's Name (L	.ast, First)		
3.	Recipients • Use Section A to identify the agen	cy's department or unit.	Use Section B to	identify an individ	lual. • Use Section	C to identif	y an outside o	organization.
	A. Name of Agency, Depa	rtment or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose	made pursi	uant to the aເ	ency's policy
	B, Name of India		Number of Ticket(s)/		ldentify on	ne of the fol	lowing:	
	(Last, Firs	i)	Passes					
	Chaffee, Terra		1		nonial Role [] king "Ceremonial Role" o ecognition	Other 🔀 or "Other" descr	ibe below:	Income 🔲
	Donnelly, Ellen		2		nonial Role ding "Ceremonial Role" o ecognition	Other 🔀	ibe below:	Income
	C. Name of Outside Or (include address and		Number of Ticket(s)/ Passes	Describe the	e public purpose r	nade pursu	ant to the ag	ency's policy
								
_	Verification			<u> </u>				
	I have read and understand FPI with the requirements. Signature of Agency Head or Designe	Ellen Do	.1 and 18942.	I have verified to	hat the distribution	01		in accordance
	Comment:	-	ş	% <i>/</i>	THE			, way, your)



	gency Name	Book a seek Astronomica	
ity	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
			4
	B. Name of Individual	Number of Ticket(s)/	Identify one of the following:
	(Last, First) Laskowska, Margo	Passes	Ceremonial Role Other Income Income Income If checking "Ceremonial Role" or "Other" describe below: Employee Recognition
-	Mitchell, Carl	1	Ceremonial Role Other Income Income Income If checking "Ceremonial Role" or "Other" describe below: Employee Recognition
	Silva, Arlene	1	Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below: Employee Recognition
-	Tsongtaatarii, Rosa	2	Ceremonial Role Other Income Income Income Employee Recognition
	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	



	Paginianta		
	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
		, 40000	
	B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
	Winchester, Colleen	2	Ceremonial Role Other Implementation Ceremonial Role" or "Other" describe below: Employee Recognition
•			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
,			
•			

۱.	Agency Name			·	Date Stamp	ollý	Califor	Document
- "	City of San Jose				` .		Forn	
	Division, Department, or Reg	jion (if applicable)		·	- 2017 JAN 23	PH	3: Fgr Of	ficial Use Only
	Office of the City Attorney	, , ,,			Thew			
	Designated Agency Contact	(Name.Title)			OTC			
	Ellen Donnelly, Legal Service	•					}	
	Area Code/Phone Number	E-mail			☐ Amendment (#	Must Pro	vide Explana	tion in Part 3.)
	408-535-1933	Ellen.Donnelly@sa	anjoseca.gov		Date of Original Fi	ling: _	(month, day	, year)
2.	Function or Event Infor	mation						
	Does the agency have a tic	ket policy? Yes	⊠ No 🗆 🗆	Face Value of	Each Ticket/Pass	\$ \frac{\$22}{}	22.00	
	Event Description: Sharks v	/. Avalanche Provide Title/Expla		Date(s) <u>01</u>	<u>, 21 , 17 </u>	_		_/
	Ticket(s)/Pass(es) provided	•		f no:	Name of Source			
	Was ticket distribution made	at the hehest V						
	of agency official?	s at the beliest Yes	LI NOM .	. you	Official's Name (Last, i	First)		and the same of
3.	Recipients • Use Section A to identify the agen	cv's department or unit.	Use Section B to	identify an individ	ual. • Use Section C to	identif	v an outside o	organization.
	A. Name of Agency, Depa	artment or Unit	Number of Ticket(s)/	Describe th	e public purpose made	e pursu	ant to the a	gency's policy
			Passes					
	B. Name of Indi	vidual	Number		Identify one of	the foll	owing:	
	B. Name of Indi						owing:	
			Number of Ticket(s)/		onial Role Oth	er 🔲		Income
	(Last, Fire		Number of Ticket(s)/ Passes	Employee R	onial Role Oth ing "Ceremonial Role" or "Oth ecognition onial Role Oth ing "Ceremonial Role" or "Oth	er 🔲 er" descri	ibe below:	Income _
	Chow, Yue-Han	ganization	Number of Ticket(s)/ Passes	Employee R Cerem If check Employee Re	onial Role Oth ing "Ceremonial Role" or "Oth ecognition onial Role Oth ing "Ceremonial Role" or "Oth	er	ibe below:	Income
	Chow, Yue-Han Moran, Ed Name of Outside On	ganization	Number of Ticket(s)/ Passes 2 Number of Ticket(s)/	Employee R Cerem If check Employee Re	onial Role Oth ing "Ceremonial Role" or "Oth ecognition onial Role Oth ing "Ceremonial Role" or "Oth	er	ibe below:	Income
	Chow, Yue-Han Moran, Ed Name of Outside On	ganization	Number of Ticket(s)/ Passes 2 Number of Ticket(s)/	Employee R Cerem If check Employee Re	onial Role Oth ing "Ceremonial Role" or "Oth ecognition onial Role Oth ing "Ceremonial Role" or "Oth	er	ibe below:	Income
	Chow, Yue-Han Moran, Ed C. Name of Outside On (include address and	ganization description)	Number of Ticket(s)/ Passes 2 Number of Ticket(s)/ Passes	Employee R Cerem If check Employee Re Describe the	onial Role Oth ing "Ceremonial Role" or "Oth ecognition onial Role Oth ing "Ceremonial Role" or "Oth ecognition e public purpose made	er	ibe below:	Income Jency's policy
	Chow, Yue-Han Moran, Ed C. Name of Outside Or (include address and	rganization description)	Number of Ticket(s)/ Passes 2 Number of Ticket(s)/ Passes	Employee R Cerem If check Employee Re Describe the	onial Role Oth ing "Ceremonial Role" or "Oth ecognition onial Role Oth ing "Ceremonial Role" or "Oth ecognition e public purpose made	er	the below: ant to the age the above, is	Income Jency's policy



Agency Name							
ty of San Jose Recipients							
' = '		• Use Section B to identify an individual. • Use Section C to identify an outside organiza					
A. Nam	ne 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	Number of Ticket(s)/	Identify one of the following:				
	(Last, First)	Passes					
Nielsen, Chr	ris	2	Ceremonial Role Other Income Income Income Income If checking "Ceremonial Role" or "Other" describe below: Employee Recognition				
Schwarzbac	h, Glenn	2	Ceremonial Role Other Income Income				
Yamada, Ch	ris	2	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below: Employee Recognition				
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:				
C. N	lame of Outside Organization clude address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy				

	eremonial Role Events and Tic				
1.	Agency Name			Date Stamp	California 802
	City of San Jose	16 JAN 19 PM 1:1			
	Division, Department, or Region (If Applicable	1	For Official Use Only		
	Office of the City Attorney				
	Designated Agency Contact (Name, Title)	1			
	Ellen Donnelly, Legal Services Administra	itor			
	Area Code/Phone Number E-mail	·	Amendment (Must prov	ide explanation in Part 3.)	
	408 535-1933 Ellen.Donne	llv@saninse	eca dov	Date of Original Filing:	
·	Function or Event Information	ny ce dan good			(Month, Day, Year)
<u>-</u> .		Yes⊠ No	. T Face Value	of Each Ticket/Pass \$	222.00
		—			
	Event Description Sharks v. Stars Provide Title/Expla	anation	Date(s)	1 , 16 , 16	
			- K		
	Ticket(s)/Pass(es) provided by agency?	Yes⊠ No	Ir no:	Name of Source	re
	Was ticket distribution made at the behest	No⊠ Yes	☐ If yes:		
	of agency official?			Official's Name (Las	t, First)
3.	Recipients	, , , , , , , , , , , , , , , , , , ,			
	Use Section A to identify the agency's department or use the section A to identify the agency's department or use the section A to identify the agency's department or use the section A to identify the agency's department or use the section A to identify the agency's department or use the section A to identify the agency's department or use the section A to identify the agency's department or use the section A to identify the agency's department or use the section A to identify the agency's department or use the section A to identify the agency and the section A to identify the agency are used to be a section A to identify the agency and the section A to identify the agency are used to be a section A to identify the agency and the section A to identify the agency are used to be a section A to identify the agency are used to be a section A to identify the agency and a section A to identify the agency and a section A to identify the agency are used to be a section A to identify the agency at the agency are used to be a section A to identify the agency and a section A to identify the agency and a section A to identify the agency at	T	ction B to identify an individ	ual. • Use Section C to identify	an outside organization.
	A. Name of Agency, Department or Unit	Number of Ticket(s)/ Pass(es)	Describe the pub	olic purpose made pursuant to	the agency's policy
					· .
	B. Name of Individual	Number of Ticket(s)/			
	(Last, First)			Identity one of the following	• ************************************
		Pass(es)		Identify one of the following	
	Dent. Mollie	Pass(es)	Ceremonial Role	Other 🗵	
	Dent, Mollie	Pass(es)	If checking "Ceremon	Other ital Role" or "Other" describe below:	
	Dent, Mollie		1	Other ital Role" or "Other" describe below:	
			If checking "Ceremon	Other ial Role" or "Other" describe below: tion	Income
	Dent, Mollie Moran, Ed	2	If checking "Ceremon Employee Recogni Ceremonial Role If checking "Ceremon	Other ial Role" or "Other" describe below: tion Other ial Role" or "Other" describe below:	Income
			If checking "Ceremon Employee Recogni Ceremonial Role	Other ial Role" or "Other" describe below: tion Other ial Role" or "Other" describe below:	Income
	Moran, Ed	2	If checking "Ceremon Employee Recogni Ceremonial Role If checking "Ceremon	Other ial Role" or "Other" describe below: tion Other ial Role" or "Other" describe below:	Income
		2 Number of Ticket(s)/	If checking "Ceremon Employee Recogni Ceremonial Role If checking "Ceremon Employee Recogni	Other ial Role" or "Other" describe below: tion Other ial Role" or "Other" describe below:	Income _
	Moran, Ed Name of Outside Organization	2 2 Number of	If checking "Ceremon Employee Recogni Ceremonial Role If checking "Ceremon Employee Recogni	Other ial Role" or "Other" describe below: tion Other ial Role" or "Other" describe below: tial Role" or "Other" describe below: tion	Income _
	Moran, Ed Name of Outside Organization	2 Number of Ticket(s)/	If checking "Ceremon Employee Recogni Ceremonial Role If checking "Ceremon Employee Recogni	Other ial Role" or "Other" describe below: tion Other ial Role" or "Other" describe below: tial Role" or "Other" describe below: tion	Income I
	Moran, Ed Name of Outside Organization	2 Number of Ticket(s)/	If checking "Ceremon Employee Recogni Ceremonial Role If checking "Ceremon Employee Recogni	Other ial Role" or "Other" describe below: tion Other ial Role" or "Other" describe below: tial Role" or "Other" describe below: tion	Income I
	Moran, Ed Name of Outside Organization	2 Number of Ticket(s)/	If checking "Ceremon Employee Recogni Ceremonial Role If checking "Ceremon Employee Recogni	Other ial Role" or "Other" describe below: tion Other ial Role" or "Other" describe below: tial Role" or "Other" describe below: tion	Income I
	Moran, Ed C. Name of Outside Organization (include address and description)	2 Number of Ticket(s)/	If checking "Ceremon Employee Recogni Ceremonial Role If checking "Ceremon Employee Recogni	Other ial Role" or "Other" describe below: tion Other ial Role" or "Other" describe below: tial Role" or "Other" describe below: tion	Income I
	Moran, Ed C. Name of Outside Organization (include address and description) Verification	2 Number of Ticket(s)/ Pass(es)	If checking "Ceremoni Employee Recogni Ceremonial Role If checking "Ceremoni Employee Recogni Describe the pub	Other ial Role" or "Other" describe below: tion Other ial Role" or "Other" describe below: tion ition Other identification ition Itio purpose made pursuant to	Income In
•	Moran, Ed C. Name of Outside Organization (include address and description)	2 Number of Ticket(s)/ Pass(es)	If checking "Ceremon Employee Recogni Ceremonial Role If checking "Ceremon Employee Recogni Describe the pub	Other ial Role" or "Other" describe below: tion Other ial Role" or "Other" describe below: tion ition Other identification ition Itio purpose made pursuant to	Income In

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Agency Report of:

Comment: __



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			
Name of Individual (Last, First)	Number of Ticket(s)/ Pass(es)	Identify one of the following:			
Calegari, Jon	2	Ceremonial Role Other I Income If checking "Ceremonial Role" or "Other" describe below: Employee Recognition			
Phan, Johnny	2	Ceremonial Role Other Income Income			
Hutchins, Suzanne	2	Ceremonial Role Other Income Income			
Todorov, Vera	2	Ceremonial Role Other Mincome Income Income Income Englished Ceremonial Role" or "Other" describe below: Employee Recognition			
C. Name of Outside Organization (includé address and description)	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy			



gency Name City of San Jose						
. Recipients						
A. Name of Agency, Department or Unit	Number of Ticket(s)/ Pass(es)					
B. Name of Individual (Last, First)	Number of Ticket(s)/ Pass(es)	Identify one of the following:				
(Last, First) Tong, Dan	2	Ceremonial Role Other M Income Income If checking "Ceremonial Role" or "Other" describe below: Employee Recognition				
Doyle, Richard	2	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below: Employee Recognition				
		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)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy				

Agency Report of: Ceremonial Role Events and Ticket/Pass Distribution Sosio City Clerk A Public Document 1. Agency Name California Form 2015 APR City of San Jose For Official Use Only Division, Department, or Region (If Applicable) Office of the City Attorney **Designated Agency Contact** (Name, Title) Ellen Donnelly, Legal Services Administrator Amendment (Must provide explanation in Part 3.) Area Code/Phone Number **Date of Original Filing:** 408-535-1933 Ellen.Donnelly@sanjoseca.gov (Month, Day, Year) 2. Function or Event Information 125 Does the agency have a ticket policy? Face Value of Each Ticket/Pass \$ Yes⊠ No□ Event Description Maroon 5 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: of agency official? Official's Name (Last, First) 3. Recipients • Use Section B to identify an individual. • Use Section C to identify an outside organization. . Use Section A to identify the agency's department or unit. Number of Name of Agency, Department or Unit Describe the public purpose made pursuant to the agency's policy Ticket(s)/ Pass(es) Number of В. Name of Individual Identify one of the following: Ticket(s)/ Pass(es) Ceremonial Role Other 🗵 Income Creech, Christopher If checking "Ceremonial Role" or "Other" describe below: **Employee Recognition** Other 🗵 Ceremonial Role Income Greenberg, Cliff If checking "Ceremonial Role" or "Other" describe below: 1 **Employee Recognition** Number of Name of Outside Organization C. Describe the public purpose made pursuant to the agency's policy Ticket(s)/ Pass(es) (include address and description)

1			
Verification wave read and understand FPPC Regulation	s 18944,1 and 18942. I have verified that th	e distribution set forth above, is in accordan	ce with the requirements. Amnistrator 4-2-1
Signature of Agency Head or Designee	Print Name	Title	(Month, Day, Year)
Comment:			FPPC Form 802 (4/12) ne: 866/ASK-FPPC (866/275-7772)



gency Name City of San Jose							
Recipients • Use Section A to identify the agency's department or	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:					
Klotz, Elizabeth	. 1	Ceremonial Role Other Image Income Income If checking "Ceremonial Role" or "Other" describe below: Employee Recognition					
Moran, Ed	1	Ceremonial Role Other Image Income In					
Murtha, Tom	2	Ceremonial Role Other Image Income Income If checking "Ceremonial Role" or "Other" describe below: Employee Recognition					
Richardson, Nkia	2	Ceremonial Role Other Image Income Income If checking "Ceremonial Role" or "Other" describe below: Employee Recognition					
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

A Public Document

••	Agency Name City of San Jose			BACSHIVED	California 802
	Division, Department, or Region (If A	APR 0 2 2015	For Official Use Only		
	Office of the City Attorney	City of San Jose			
	Designated Agency Contact (Name, 7	Office of the City Clerk			
	Ellen Donnelly, Legal Services Ad				
	Area Code/Phone Number E-mai	Amendment (Must pro	vide explanation in Part 3.)		
	408-535-1933 Ellen	.Donnelly@sanjos	eca.gov	Date of Original Filing:	(Month, Day, Year)
2.	Function or Event Informatio				125
	Does the agency have a ticket policy		of Each Ticket/Pass \$	120	
	Event Description Maroon 5	Tu Contoni	Date(s)3	<u>, 31 , 15 </u>	
		Title/Explanation			
	Ticket(s)/Pass(es) provided by agend	cy? Yes⊠ No	If no:	Name of Source	ce
	Was ticket distribution made at the b of agency official?	ehest No⊠ Yes	i□ If yes:	Official's Name (La	st, First)
3.	Recipients				
	Use Section A to identify the agency's depart	tment or unit. • Use Se	ction B to identify an individu	ual. • Use Section C to Identify	/ an outside organization.
	A. Name of Agency, Department or Un	it Number of Ticket(s)/ Pass(es)	Describe the pub	lic 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) :
	Smyth-Mendoza, Shannon	1	Ceremonial Role If checking "Ceremoni Employee Recognit	al Role" or "Other" describe below:	Income
	Silva, Arlene	1	Ceremonial Role If checking "Ceremoni Employee Recognit	al Role" or "Other" describe below:	income 🔲
	C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Pass(es)	Describe the publ	lic purpose made pursuant to	the agency's policy
	Verification I have read and understand FPPC Regulations 18: Signature of Agency Head or Designee	944.1 and 18942. I have ve	illy begg	orth above, is in accordance with to Services Odmunis	1 1 11 7 0



Recipients • Use Section A to Identify the agency's department or u	ecipients Jse 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	Number of Ticket(s)/ Pass(es)	Identify one of the following:				
Torres, Natalie	1	Ceremonial Role Other Mescribe below: If checking "Ceremonial Role" or "Other" describe below: Employee Recognition				
		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:				
		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)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy				

A C	gency Report of: eremonial Role Event	s and Tic	ket/Pass	s Distribution ទ ា	RECEIVED I Jose City Clark	A Public Document
	Agency Name		Date Stamp	California 802		
	City of San Jose 2015 F				EB -3 PM 3: 26	Form OUZ
	Division, Department, or Region (If Applicable)				(95) RNHP	For Official Use Only
	Office of the City Attorney					
	Designated Agency Contact (/\	lame, Title)				
	Ellen Donnelly, Legal Service	es Administra	itor	•		
	Area Code/Phone Number	E-mail	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	Amendment (Must pr	
	408-535-1933	Ellen.Donne	lly@sanjose	eca.gov	Date of Original Filing: ـ	(Month, Day, Year)
2.	Function or Event Inform	nation				
	Does the agency have a ticket		Yes 🗵 No	Face Value o	of Each Ticket/Pass \$	206.00
	Event Description Sharks v. B	lackhawks Provide Title/Expla	anation	Date(s)01	, 31 , 15	
•	Ticket(s)/Pass(es) provided by	agency?	Yes⊠ No	If no:	Name of Sou	rce
,	Was ticket distribution made at	the behest	No⊠ Yes	If yes:		
	of agency official?		140 23 163	п усъ	Official's Name (L	ast, First)
	Recipients					
7	 Use Section A to identify the agency? 	s department or ι		ction B to identify an individu	ıal. ● Use Section C to identi	fy an outside organization.
3	A. Name of Agency, Departmen	t or Unit	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy		
Ī	B. Name of Individual		Number of Ticket(s)/		Identify one of the following	g:
<u> </u>	ilas, risi		Pass(es)	Ceremoniai Role	Other 🛛	· ¬
İ	Doyle, Richard		2	•	al Role" or "Other" describe below:	Income L
-	Lee, Sandy 2		2	Ceremonial Role Other Inco If checking "Ceremonial Role" or "Other" describe below: Employee Recognition		
_	Name of Outside Organiz (include address and descr		Number of Ticket(s)/ Pass(es)	Describe the publ	ic purpose made pursuant t	o the agency's policy
_						
	/erification					
11	have fead and understand FPPC Regulati	ions 18944.1 and	18942. I have ve Un Wn	11.	rth above, is in accordance with µl 5eWiwn Old	
ئد.	Signature of Agency Head or Designee	_	Print Nam	ie /	Title	(Month, Day, Year)

Comment:



Agency Name City 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)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy			
	B. Name of Individual	Number of Ticket(s)/ Pass(es)	Identify one of the following:			
	Tsongtaatarii, Rosa	1	Ceremonial Role Other Image Income Income Income If checking "Ceremonial Role" or "Other" describe below: Employee Recognition			
	Todorov, Vera	2	Ceremonial Role Other Member 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)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy			
•						

Date Stamp City of San Jose Division, Department, or Region (If Applicable)	Agency Report of: Ceremonial Role Ever	nts and Tic	ket/Pass	s DistributionsSa	RECEIVED an Jose City Clerk	A Public Document
Office of the City Attorney Designated Agency Contact (Name, Tible) Ellen Donnelly, Legal Services Administrator Area Codd/Phone Number E-mail	1. Agency Name				Date Stamp	California 802
Designated Agency Contact (Name, Title)	Division, Department, or Reg	Division, Department, or Region (If Applicable)				For Official Use Only
Designated Agency Contact (Name, Title)	Office of the City Attorney					
Area Code/Phone Number E-mail Ellen. Donnelly@sanjoseca.gov Date of Original Filling: Area Code/Phone Number of Jessel Phone Part 3) Date of Original Filling: Area Code/Phone Number of Jessel Phone Part 3) Date of Original Filling: Area Code/Phone Number of Jessel Phone Part 3) Date of Original Filling: Area Code Part 3) Date of Original Filling: Area Code Part 3) Date of Original Filling: (Month, Day, Year) Date of Original Filling	· · · · · · · · · · · · · · · · · · ·					
Area Code/Phone Number E-mail Ellen. Donnelly@sanjoseca.gov Date of Original Filling: Area Code/Phone Number of Jessel Phone Part 3) Date of Original Filling: Area Code/Phone Number of Jessel Phone Part 3) Date of Original Filling: Area Code/Phone Number of Jessel Phone Part 3) Date of Original Filling: Area Code Part 3) Date of Original Filling: Area Code Part 3) Date of Original Filling: (Month, Day, Year) Date of Original Filling	Ellen Donnelly, Legal Servi	ces Administra				
2. Function or Event Information Does the agency have a ticket policy? Yes \ No \ Face Value of Each Ticket/Pass \ 206.00 Event Description Sharks v. Blackhawks 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? 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 Pass(es) B. Name of Individual Number of Ticket(s)/ Pass(es) Describe the public purpose made pursuant to the agency's policy Identify one of the following: Ceremonial Role Other \ New Ticket(s)/ Pass(es) Describe the public purpose made pursuant to the agency's policy Income I					Amendment (Must pro	vide explanation in Part 3.)
Procession or Event Information Does the agency have a ticket policy? Yes \ No \ Face Value of Each Ticket/Pass \ 206.00	408-535-1933	Ellen.Donnel	ly@sanjose	eca.gov	Date of Original Filing:	(Month, Day, Year)
Does the agency have a ticket policy? Event Description Sharks v. Blackhawks Provide TibeExplanation Ticket(s)/Pass(es) provided by agency? Yes No If no: Name of Source Was ticket distribution made at the behest of agency official? Recipients *Use Section B to Identify an Individual organization. A. Name of Agency, Department or unit. *Use Section B to Identify an Individual organization. Number of Ticket(s)/Pass(es) B. Name of Agency, Department or Unit Pass(es) Pass(es) Describe the public purpose made pursuant to the agency's policy Pass(es) Describe the public purpose made pursuant to the agency's policy Describe the public purpose made pursuant to the agency's policy Pass(es) Describe the public purpose made pursuant to the agency's policy Describe the public purpose made pursuant to the agency's policy Describe the public purpose made pursuant to the agency's policy Describe the public purpose made pursuant to the agency's policy Describe the public purpose made pursuant to the agency's policy Describe the public purpose made pursuant to the agency's policy Describe the public purpose made pursuant to the agency's policy Describe the public purpose made pursuant to the agency's policy Describe the public purpose made pursuant to the agency's policy Describe the public purpose made pursuant to the agency's policy Describe the public purpose made pursuant to the agency's policy Describe the public purpose made pursuant to the agency's policy Describe the public purpose made pursuant to the agency's policy Describe the public purpose made pursuant to the agency is policy Describe the public purpose made pursuant to the agency is policy Describe the public purpose made pursuant to the agency is policy Describe the public purpose made pursuant to the agency is policy Describe the public purpose made pursuant to the agency is policy Describe the public purpose made pursuant to the agency is policy Describe the public purpose made pursuant to the a	2. Function or Event Infor	mation —				
Event Description Sharks v. Blackhawks Provide TitletExplanation	r				f Each Ticket/Pass \$	206.00
Ticket(s)/Pass(es) provided by agency? Yes No If no: Name of Source	Sharks v.		/		, 31 , 15	, ,
Name of Source Name of Source Name of Agency official? Recipients ■ Use Section A to identify the agency's department or unit. ■ Use Section B to identify an individual. A. Name of Agency, Department or Unit Number of Ticket(e)' Pass(es) Nielsen, Chris Ceremonial Role Other Income	Event Description	Provide Title/Expl	nation	Date(s)		
Name of Source Name of Source Name of Agency official? Recipients ■ Use Section A to identify the agency's department or unit. ■ Use Section B to identify an individual. A. Name of Agency, Department or Unit Number of Ticket(e)' Pass(es) Nielsen, Chris Ceremonial Role Other Income	Ticket(s)/Pass(es) provided b	ov agency?	Yes 🕅 No	☐ If no:		1
Pass(es) Name of Individual Lead Inno Noran, Ed Name of Outside Organization Number of Ticket(s) Pass(es) Ceremonial Role Recognition Ceremonial Role Recognition Ceremonial Role Recognition Ceremonial Role Recognition Number of Ticket(s) Pass(es) Ceremonial Role Recognition Recognition Recognition Ceremonial Role Recognition Recognition Ceremonial Role Recognition Recognition Recognition Ceremonial Role Recognition Recognit		,, .	163 🔼 140		Name of Sour	ce
Section A to identify the agency's department or unit. Section B to identify an individual. Section C to identify an outside organization.		at the behest	No ⊠ Yes	☐ If yes:	Official's Name (La	st, First)
A. Name of Agency, Department or Unit Ticket(s)/Pass(es) Describe the public purpose made pursuant to the agency's policy	•	cy's department or υ	ınit. • Use Se	ction B to identify an individu	al. ● Use Section C to identif	y an outside organization.
Nielsen, Chris Ticket(s)/ Pass(es) Identify one of the following:	A. Name of Agency, Department or Unit Ticket(s)/			Describe the public purpose made pursuant to the agency's policy		
Nielsen, Chris Ticket(s) Pass(es) Identify one of the following:					·	
Nielsen, Chris 2 If checking "Ceremonial Role" or "Other" describe below: Employee Recognition Ceremonial Role Other Income Inc	B. Name of Individu	al	Ticket(s)/		Identify one of the following	J:
Moran, Ed 2 If checking "Ceremonial Role" or "Other" describe below: Employee Recognition Number of Ticket(s)/ Pass(es) Describe the public purpose made pursuant to the agency's policy Pass(es) 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. Lega Samus Administrator 2-2-1	Nielsen, Chris		2	If checking "Ceremoni	al Role" or "Other" describe below:	Income 🗖
C. Name of Outside Organization (include address and description) Ticket(s)/ Pass(es) Describe the public purpose made pursuant to the agency's policy 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. Lien Dannelly Legal Samus Odmunitation 2-2-1	Moran, Ed	C. Name of Outside Organization Number of Ticket(s)/		If checking "Ceremonia	al Role" or "Other" describe below:	Income 🔲
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. Lega Sunus administrator 2-2-1						
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. Lega Sunus administrator 2-2-1						
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. Lega Sunus administrator 2-2-1	Verification					
		611	7	erified that the distribution set fo	1 27 0 1	1 4
	Signature of Agency Head or Designee		90.1.70	ne / /	······································	

Agency Report of:

Comment: ___



gency Name City of San Jose		
Recipients	ınit. • Use Se	ction 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:
Schwarzbach, Glenn	1	Ceremonial Role Other I Income I Income I Income I If checking "Ceremonial Role" or "Other" describe below: Employee Recognition
Goldberg, Leah	2	Ceremonial Role Other I Income I If checking "Ceremonial Role" or "Other" describe below: Employee Recognition
Acosta, Norma	2	Ceremonial Role Other Mescribe below: If checking "Ceremonial Role" or "Other" describe below: Employee Recognition
North, Richard	2	Ceremonial Role Other M Income Income If checking "Ceremonial Role" or "Other" describe below: Employee Recognition
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

RECEIVED San José City Clerk A Public Document

						711 48110 2 0 0 41110111
1.	Agency Name				2014 Deate Stamp PM 2	California 802
	City of San Jose				,,,,	Form COZ
	Division, Department, or Reg	ion (If Applicable	e)			For Official Use Only
	Office of the City Attorney					,
	Designated Agency Contact	Name, Title)	1			
	Daniel Tong, Chief of Staff					
	Area Code/Phone Number	E-mail			Amendment (Must pro	vide explanation in Part 3.)
	(408) 535-1931	daniel.tong@	@sanjoseca.	.gov	Date of Original Filing: _	(Month, Day, Year)
2.	Function or Event Infor	mation			<u> </u>	· · · · · · · · · · · · · · · · · · ·
	Does the agency have a ticke	t policy?	Yes⊠ No	Face Value o	of Each Ticket/Pass \$	199.50
	Event DescriptionFleetwood	Мас		Data(s) 11	1 , 25 , 14	1 1
	Event Description	Provide Title/Exp	lanation	Date(3)	<u></u>	
	Ticket(s)/Pass(es) provided by	y agency?	Yes⊠ No	☐ If no:		
	AME COLOR POLES Communication				Name of Sour	ce
	Was ticket distribution made a of agency official?	it the benest	No⊠ Yes	lf yes:	Official's Name (La	st, First)
_						<u> </u>
3.	Recipients • Use Section A to identify the agence	/'s department or	unit. • Use Se	ction B to identify an individu	ual. • Use Section C to identif	v an outside organization.
	A. Name of Agency, Departme	nt or Unit	Number of	Describe the pub	olic purpose made pursuant to	the agency's policy
	A. Name of Agency, Departine	III OF OTH	Ticket(s)/ Pass(es)	Describe die pub	nic purpose made pursuant d	o the agency's policy
			i 			
	B. Name of Individua	d	Number of Ticket(s)/		Identify one of the following	g:
	1		Pass(es)	0	Other 🛛	
	Deignan, Patty			Ceremonial Role If checking "Ceremoni	ial Role" or "Other" describe below:	Income 🔲
			1	Employee Recognit	tion	
	D:II Ot	4		Ceremonial Role		Income
	Dippell, Steve		1	Employee Recognit	ial Role" or "Other" describe below:	
				Linployee Recognit		
	C Name of Outside Organ	ization	Number of			-
	(include address and des		Ticket(s)/ Pass(es)	Describe the publ	lic purpose made pursuant to	the agency's policy
•						
			;			
-	Verification	ŧ				
	have read and understand FPPC Regul	ations 18944.1 and	l 18942. I have ve	erified that the distribution set fo	orth above, is in accordance with t	he requirements.
	When tow	DAN	IEZ TON	G CHI	LEF OF STAFF	12/15/14
	Signature of Agency Head or Designee		Print Nam		Title	(Month, Day, Year)
•	U					
	Comment:					



	ency Name City of San Jose	4	
	Recipients	unit. • Use Se	ction 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
		1,000(00)	
	B. Name of Individual (Last First)	Number of Ticket(s)/ Pass(es)	Identify one of the following:
	Laskowska, Margo	1	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below: Employee Recognition
,			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
•		1	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:
770 W - 10 W 2000	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 **A Public Document** 1. Agency Name Date Stamp California **Form** City of San Jose 2014 APR 21 A 8:42 For Official Use Only Division, Department, or Region (If Applicable) Office of the City Attorney Designated Agency Contact (Name, Title) Timothy Birch, Legal Services Administrator Amendment (Must provide explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: 04/16/14 408/535-1931 tim.birch@sanjoseca.gov 2. Function or Event Information Does the agency have a ticket policy? Face Value of Each Ticket/Pass \$... Yes ⊠ No □ Event Description Kings of Leon Concert 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 ⊠ Yes □ If 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 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) Office of the City Attorney **Employee Recognition** 16 Number of B. Name of Individual Ticket(s)/ Pass(es) Identify one of the following: (Last, First) Ceremonial Role Other X Income Tolentino, Elisa If checking "Ceremonial Role" or "Other" describe below: 2 **Employee Recognition** Other 🗵 Ceremonial Role 🔲 Income Klotz, Elizabeth If checking "Ceremonial Role" or "Other" describe below: 2 Employee Recognition Number of C. Name of Outside Organization Ticket(s)/ Describe the public purpose made pursuant to the agency's policy (include address and description) Pass(es) 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. Timothy Birch Legal Services Administrator 04/16/14 Signature of Agency Head or Designee Print Name Title (Month, Day, Year)

The Office of the City Attorney received 16 tickets, but only 4 of the recipients are designated employees.

eremonial Ro	ole Event	s and lick	et/Pass	Distributions ————Sam	RECEIVED Jose City Clar	A Public Documen
Agency Name					Date Stamp	California 802
Division, Departm	ent, or Regi	on (If Applicable)		2014	APR 21 A 8:	For Official Use Only
Office of the City					10m. Al) ·
Designated Agen		Vame, Title)				
Timothy Birch, L	egal Service	es Administrato	or			lust provide explanation in Part 3.)
Area Code/Phone		E-mail			_	04/16/14
408/535-1931		tim.birch@sai	njoseca.gov		Date of Original Fili	ing: (Month, Day, Year)
Function or E	have a ticke	t policy?	Yes⊠ No[f Each Ticket/Pass	
Event Description	Gabriel Igl	esias Comedy Provide Title/Explai	Show	P.		
Ticket(s)/Pass(es) provided by	y agency?	Yes⊠ No[lf no:	Name	of Source
Was ticket distrib		t the behest	No⊠ Yes i	☐ If yes:	Officiai's Na	ame (Last, First)
. Recipients • Use Section A to Ide	entify the agenc	y's department or u	nit. • Use Sec	tion B to identify an Individ	ual. • Use Section C to	identify an outside organization.
A. Name of Ag	ency, Departme	ent or Unit	Number of Ticket(s)/ Pass(es)	Describe the put	lic purpose made purs	suant to the agency's policy
Office of the Cit	y Attorney		10	Employee Recogni	tion	
B. Na	me of Individu	al Assa	Number of Ticket(s)/		Identify one of the fo	ollowing:
	(Last, First)		Pass(es)			Income
Calegari, Jon			2	Ceremonial Role If checking "Ceremo Employee Recogn	niel Role" or "Other" describ e b	
Murtha, Tom		·	2	Ceremonial Role If checking "Ceremo Employee Recogn	Other inial Role" or "Other" describe b	Income below:
	f Outside Orga iddress and de		Number of Ticket(s)/ Pass(es)	Describe the pu	blic purpose made pur	suant to the agency's policy
			,			
Vonitiontion						
 Verification I have read and under 	stand FPPC Reg	ulations 18944.1 and	l 18942. I have v	erified that the distribution set	forth above, is in accorda	nce with the requirements.
1	6		Timothy	_	gal Services Admi	inistrator 04/16/14
Signature of Agen	cy Head or Design	e	Print Na	me	Title	(Month, Day, Yea



gency Name City of San Jose		
. Recipients	ınit. • Use Se	ction 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	Number of Ticket(s)/ Pass(es)	Identify one of the following:
Deignan, Patricia	2	Ceremonial Role Other Mescribe below: If checking "Ceremonial Role" or "Other" describe below: Employee Recognition
Smyth-Mendoza, Shannon	2	Ceremonial Role Other Image Income If checking "Ceremonial Role" or "Other" describe below: Employee Recognition
		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)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy
	WANTED TO THE STATE OF THE STAT	

Agency Report of:

Ceremonial Role Events and Ticket/Pass Distributions

RECEIVED San Jose City Alpublic Document

1.	Agency Name	·			Date Stamp	California 202
	City of San Jose				2014 FEB 26 At	
	Division, Department, or Reg	ion (If Applicable)		For Official Use Only		
	Office of the City Attorney					
	Designated Agency Contact	Name, Title)				
	Timothy Birch, Legal Servic	es Administrat		I Don't O		
	Area Code/Phone Number	E-maii			. Amendment (Must pro	· · · · · · · · · · · · · · · · · · ·
	408/535-1931	tim.birch@sa	njoseca.go	v	Date of Original Filing:	(Month, Day, Year)
2.	Function or Event Infor	mation				189
	Does the agency have a ticke	t policy?	Yes 🛛 No		of Each Ticket/Pass \$	109
	Event Description Eagles Concert Date(s) Date(s)			<u>, 29 , 14</u>		
	Event becomption	Provide Title/Expla				
	Ticket(s)/Pass(es) provided b	y agency?	Yes 🗵 No	☐ If no:	Name of Sou	rce
	Was ticket distribution made a	at the behest	No⊠ Yes	□ If year	· · · · · · · · · · · · · · · · · · ·	
	of agency official?	at the bonest	NO MI 162	☐ If yes:	Official's Nama (L	ast, First)
3.	Recipients					
	Use Section A to Identify the agence	y's department or u		ction B to identify an individe	ual. • Use Section C to ident	fy an outside organization.
	A. Name of Agency, Departme	ent or Unit	Number of Ticket(s) <i>t</i> Pass(es)	Describe the pub	ilic purpose made pursuant	to the agency's policy
	Office of the City Attorney		16	Employee Recogni	tion	
	B. Name of Individu	al	Number of Ticket(s)/ Pass(es)		Identify one of the followi	n gt
	Doyle, John Richard		2	Ceremonial Role If checking *Ceremon Employee Recogn	nial Role" or "Other" describe below:	Income C
	McGee-Davies, Kendra		2	Ceremonial Role If checking "Ceremon Employee Recogni	nial Role" or "Other" describe below:	Income C
	C. Name of Outside Organ (include address and de-	nization scription)	Number of Ticket(s)/ Pass(es)	Describe the pul	olic purpose made pursuant	to the agency's policy
					•	
A	Varification'					
4.	Verification I have read and understand FPRC Regulations	uletions 18944.1 end	18942. i have v	erified that the distribution set	forth above, is in accordance wit	h the requirements.
	1	energy .	Timothy I		gal Services Administra	
	Signature of Agency Head or Designe	e	Print Nar		Title	(Month, Day, Year)



ency Name City of San Jose		
Recipients • Use Section A to Identify the agency's department or u	nit. ● Use Sec	ction 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	Number of Ticket(s)/ Pass(es)	Identify one of the following:
Deignan, Patricia	1	Ceremonial Role Other Mescribe below: If checking "Ceremonial Role" or "Other" describe below: Employee Recognition
Dippell, Steven	2	Ceremonial Role Other M Income Income If checking "Ceremonial Role" or "Other" describe below: Employee Recognition
Birch, Timothy	1	Ceremonial Role Other Mescribe below: If checking "Ceremonial Role" or "Other" describe below: Employee Recognition
		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)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy
		·

Agency Report of:

Ceremonial Role Events and Ticket/Pass Distributions

RECEIVED San Jose City Alpublic Document

1.	Agency Name	·			Date Stamp	California 202
	City of San Jose				2014 FEB 26 At	
	Division, Department, or Reg	ion (If Applicable)		For Official Use Only		
	Office of the City Attorney					
	Designated Agency Contact	Name, Title)				
	Timothy Birch, Legal Servic	es Administrat		I Don't O		
	Area Code/Phone Number	E-maii			. Amendment (Must pro	· · · · · · · · · · · · · · · · · · ·
	408/535-1931	tim.birch@sa	njoseca.go	V	Date of Original Filing:	(Month, Day, Year)
2.	Function or Event Infor	mation				189
	Does the agency have a ticke	t policy?	Yes 🛛 No		of Each Ticket/Pass \$	109
	Event Description Eagles Concert Date(s) Date(s)			<u>, 29 , 14</u>		
	Event becomption	Provide Title/Expla				
	Ticket(s)/Pass(es) provided b	y agency?	Yes 🗵 No	☐ If no:	Name of Sou	rce
	Was ticket distribution made a	at the behest	No⊠ Yes	□ If year	· · · · · · · · · · · · · · · · · · ·	
	of agency official?	ino poriobi	NO MI 162	☐ If yes:	Official's Nama (L	ast, First)
3.	Recipients					
	Use Section A to Identify the agence	y's department or u		ction B to identify an individe	ual. • Use Section C to ident	fy an outside organization.
	A. Name of Agency, Departme	ent or Unit	Number of Ticket(s) <i>t</i> Pass(es)	Describe the pub	ilic purpose made pursuant	to the agency's policy
	Office of the City Attorney		16	Employee Recogni	tion	
	B. Name of Individu	al	Number of Ticket(s)/ Pass(es)		Identify one of the followi	n gt
	Doyle, John Richard		2	Ceremonial Role If checking *Ceremon Employee Recogn	nial Role" or "Other" describe below:	Income C
	McGee-Davies, Kendra		2	Ceremonial Role If checking "Ceremon Employee Recogni	nial Role" or "Other" describe below:	Income C
	C. Name of Outside Organ (include address and de-	nization scription)	Number of Ticket(s)/ Pass(es)	Describe the pul	olic purpose made pursuant	to the agency's policy
					•	
A	Varification'					
4.	Verification I have read and understand FPRC Regulations	uletions 18944.1 end	18942. i have v	erified that the distribution set	forth above, is in accordance wit	h the requirements.
	1	energy .	Timothy I		gal Services Administra	
	Signature of Agency Head or Designe	e	Print Nar		Title	(Month, Day, Year)



ency Name City of San Jose		
Recipients • Use Section A to Identify the agency's department or u	nit. ● Use Sec	ction 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	Number of Ticket(s)/ Pass(es)	Identify one of the following:
Deignan, Patricia	1	Ceremonial Role Other Mescribe below: If checking "Ceremonial Role" or "Other" describe below: Employee Recognition
Dippell, Steven	2	Ceremonial Role Other M Income Income If checking "Ceremonial Role" or "Other" describe below: Employee Recognition
Birch, Timothy	1	Ceremonial Role Other Mescribe below: If checking "Ceremonial Role" or "Other" describe below: Employee Recognition
		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)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy
		·

Agency Report of: RECEIVED

C	eremonial Role Events and Ti	cket/Pass	Distribution \$08	e City Clark	A Public Document
and process	Agency Name			Dale Stamp	California 802
	City of San Jose		2014 FEB	26 AM 9: 21	Form For Official Use Only
	Division, Department, or Region (If Applicate	ole)			1 of Official Ose Offig
	Office of the City Attorney				
	Designated Agency Contact (Name, Title)				
	Timothy Birch, Legal Services Administr	ator		Amandment (Must a	rovide explanation In Part 3.)
	Area Code/Phone Number E-mail				02/24/14
Manager		sanjoseca.go	V	Date of Original Filing:	(Month, Day, Year)
2.	Function or Event Information			6 E - 1 E 1 - 1 E	192
	Does the agency have a ticket policy?	Yes⊠ No		of Each Ticket/Pass \$ _	
	Event Description San Jose Sharks vs. N	/linnesota Wild	d Date(s)01	1. <u>j</u> 25 , 14	
	Ticket(s)/Pass(es) provided by agency?	Yes 🗵 No	[] IIII0.	Name of So	urce
	Was ticket distribution made at the behest of agency official?	No⊠ Yes	☐ If yes:	Official's Name (i	Last, First)
3.	Recipients • Use Section A to Identify the agency's department	or unit. • Use Sec	ction B to Identify an Individ	ual. ● Use Section C to iden	tify an outside organization.
	A. Name of Agency, Department or Unit	Number of Ticket(s)/ Pass(es)	Describe the put	olic purpose made pursuant	to the agency's policy
	Office of the City Attorney	24	Employee Recogn	ition	
	B. Name of Individual	Number of Ticket(s)! Pass(es)		Identify one of the follow	ing:
	Nielsen, Christian	2	Ceremonial Role If checking "Ceremon Employee Recogn	nial Role" or "Other" describe below:	Income
	Schwarzbach, Glenn	2	Ceremonial Role If checking "Ceremon Employee Recogn	nial Role" or "Other" describe below:	Income
	C. Name of Outside Organization (include address and description)	Number of Ticket(s)! Pass(es)	Describe the pul	olic purpose made pursuant	to the agency's policy
1					
4.	Verification				
	I have read and understand FPPC Regulations 18944.1	and 18942. I have v	erified that the distribution set	forth above, is in accordance wi	th the requirements.
		Timothy		gal Services Administr	The second secon
	Signature of Agency Head or Designee	Print Nar	me	Title	(Month, Day, Year)

4.	Ve	rific	ation
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The Office of the City Attorney received 24 tickets, but only 5 of the recipients are designated employees.



Recipients		
		ction 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	Number of Ticket(s)/ Pass(es)	Identify one of the following:
Moran, Edmundo	4	Ceremonial Role Other Mescribe below: If checking "Ceremonial Role" or "Other" describe below: Employee Recognition
Acosta, Norma	2	Ceremonial Role Other Income Income Income If checking "Ceremonial Role" or "Other" describe below: Employee Recognition
Todorov, Vera	3	Ceremonial Role Other Income [If checking "Ceremonial Role" or "Other" describe below: Employee Recognition
		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)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy

Ceremonial Role Events and Ticket/Pass Distributions RECEIVED A Public Document Date Stamp California 1. Agency Name **Form** City of San Jose 2013 MAY AM 10: 22 For Official Use Only Division, Department, or Region (If Applicable) Office of the City Attorney Designated Agency Contact (Name, Title) Timothy Birch, Legal Services Administrator Amendment (Must provide explanation in Part 3.) Area Code/Phone Number E-mail 05/23/13 Date of Original Filing: 408/535-1931 tim.birch@sanjoseca.gov (Month, Day, Year) 2. Function or Event Information 149.50 Face Value of Each Ticket/Pass \$ ___ Does the agency have a ticket policy? Yes⊠ No□ Concert - Fleetwood Mac 22 Date(s) **Event Description** Provide Title/Explanation Ticket(s)/Pass(es) provided by agency? if no: . Yes 🛛 No 🗌 Was ticket distribution made at the behest No ⊠ 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 Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit Ticket(s)/ Pass(es) Office of the City Attorney **Employee Recognition** 16 Number of Name of Individual В. Ticket(s)/ Identify one of the following: Pass(es) Ceremonial Role Other X Income Birch, Timothy If checking "Ceremonial Role" or "Other" describe below: 2 **Employee Recognition** Ceremonial Role Other X Income L If checking "Ceremonial Role" or "Other" describe below: Dippell, Steve 2 **Employee Recognition** Number of Name of Outside Organization Describe the public purpose made pursuant to the agency's policy Ticket(s)/ (include address and description) Pass(es) Verification t 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. Legal Services Administrator 05/23/13 Timothy Birch Print Name Signature of Agency Head or Designee

The Office of the City Attorney received 16 tickets, but only seven of the recipients are designated employees.

Agency Report of:

FPPC Form 802 (4/12)



gency Name City of San Jose		
Recipients	rtment or unit. • Use Sec	tion B to identify an individual. ● Use Section C to identify an outside organization.
A. Name of Agency, Department or Ur	Number of	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:
Greenberg, Cliff	1	Ceremonial Role Other I Income I Income I Income I Income I If checking "Ceremonial Role" or "Other" describe below: Employee Recognition
McGee-Davies, Kendra		Ceremonial Role Other Income
Mitchell, Carl	1	Ceremonial Role Other M Income Income Income Englished Role or "Other" describe below: Employee Recognition
Tolentino, Elisa	1	Ceremonial Role Other I Income Income If checking "Ceremonial Role" or "Other" describe below: Employee Recognition
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



	y Name of San Jose		
Re	cipients	ınit. • Use Sec	ction 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
<u></u>			
B.	Name of Individual (Last, First)	Number of Ticket(s)/ Pass(es)	Identify one of the following:
Tso	ongtaatarii, Rosa	1	Ceremonial Role Other M Income If checking "Ceremonial Role" or "Other" describe below: Employee Recognition
-	•		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:
С.	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

A Public Document

. Agency Name			Date Stamp	California OAS
City of San Jose				Form 602
Division, Department, or Region (f Annlicable)		For Official Use Only	
	, ipplication			
Office of the City Attorney				
Designated Agency Contact (Name	,Title)		·	
Timothy Birch, Legal Services Administrator Area Code/Phone Number E-mail			Amendment (Must provide explanation in Part 3.)	
			Date of Original Filing: 04/11/13 (Month, Day, Year)	
408/535-1931 tim.	.birch@sanjoseca.go	V	Date of Original Filing	j:(Month, Day, Year)
. Function or Event Informati	on			192
Does the agency have a ticket poli	cy? Yes⊠ No		of Each Ticket/Pass\$	
Event Description San Jose Shar	ks vs. Dallas Stars	Date(s) 04	, 07 , 13	
Event Description San Jose Shar	ide Title/Explanation			
Ticket(s)/Pass(es) provided by age	ency? Yes⊠ No	☐ If no:	Neme of S	
				•
Was ticket distribution made at the of agency official?	behest No 🗵 Yes	☐ If yes:	Official's Name	e (Lest. First)
or agency official?				1
. Recipients		ation B to Identify an individu	ual - Alleo Sootlan C to lde	ontify an outside organization
Use Section A to identify the agency's de	Number of			
A. Name of Agency, Department or	Unit Ticket(s)/ Pass(es)	Describe the pub	olic purpose made pursua	int to the agency's policy
Office of the City Attorney		Employee Recognition		
Office of the Oily Attorney	24	Limpley corrections		
B. Name of Individual	Number of Ticket(s)/ Pass(es)		Identify one of the folio	owing:
Moran, Edmundo	2	Ceremonial Role If checking *Ceremor Employee Recogn	niel Role" or "Other" describe below	Income 🔲 w:
Nielsen, Christian	2	Ceremonial Role If checking "Ceremon Employee Recogn	Other ition	Income 🔲
C. Name of Outside Organization (include address and descript		Describe the pul	blic purpose made pursua	ant to the agency's policy
			•	
			,	
1. Verification I have read and understand FPPC Regulation.	s 18944.1 and 18942. I have v	verified that the distribution set	forth above, is in eccordence	with the requirements.
	Timothy	Birch Le	gal Services Adminis	strator 04/11/13
Signature of Agency Head or Designee	Print Na		Title	(Month, Day, Year)
Comment. The Office of the City	Attorney received 24	4 tickets, but only six	of the recipients are	designated employees.

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California Form 2014 MAR 28 City of San Jose 12: 17 For Official Use Only Division, Department, or Region (If Applicable) Sul Office of the City Attorney Designated Agency Contact (Name, Title) Timothy Birch, Legal Services Administrator ☐ Amendment (Must provide explanation in Part 3.) **Area Code/Phone Number** E-mail Date of Original Filing: 03/05/2013 408/535-1931 tim.birch@sanjoseca.gov 2. Function or Event Information 143 Face Value of Each Ticket/Pass \$ Does the agency have a ticket policy? Yes ⊠ No □ Event Description Stars on Ice Date(s) Provide Title/Explanation If no:. Ticket(s)/Pass(es) provided by agency? Yes ⊠ No □ Name of Source Was ticket distribution made at the behest No ☑ Yes □ If yes: _ Officiai'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) **Employee Recognition** Office of the City Atorney 16 Number of Name of Individual B. Ticket(s)/ Pass(es) Identify one of the following: Other | Ceremonial Role Income | Deignan, Patricia If checking "Ceremonial Role" or "Other" describe below: 1 **Employee Recognition** Other X Ceremonial Role Income Brennen, Richard If checking "Ceremoniel Role" or "Other" describe below: 1 **Employee Recognition** Number of Name of Outside Organization C. Ticket(s)/ Describe the public purpose made pursuant to the agency's policy (include address and description) Pasa(es)

Verification			
	4.1 and 18942. I have verified that the d	istribulion set forth above, is in accordance with the requ	uirements.
1	Timothy Birch	Legal Services Administrator	03/05/2013
Signeture of Agency Head or Designee	Print Name	Title	(Month, Day, Year)



	cy Name y of San Jose		
	ecipients Jse Section A to Identify the agency's department or u	nit. • Use Sec	ction 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
\$10000000			
_ B	Name of Individual (Last, First)	Number of Ticket(s)/ Pass(es)	identify one of the following:
L	askowska, Malgorzata	2	Ceremonial Role Other I Income I
geometr			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
		-	Ceremoniel 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)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy
. —	<u> </u>		