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

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1. Agency Name

City of San Jose

Division, Department, or Region *(if applicable)*

Housing Department

Designated Agency Contact *(Name, Title)*

Maria Malloy, Analyst

Area Code/Phone Number	E-mail
408-975-4413	maria.malloy@sanjoseca.gov

Date Stamp

☐ **Amendment** *(Must Provide Explanation in Part 3.)*

Date of Original Filing: _____ *(month, day, year)*

2. Function or Event Information

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

Event Description: Sharks Versus Minnesota Wild *Provide Title/ Explanation* Date(s) 03 / 05 / 20 ___/___/___

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

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

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
City of San Jose Housing Department	16	16 suite tickets to recognize staff for the 2019 Green Commute Challenge
City of San Jose Housing Department	8	8 lower level tickets -- same purpose as listed above

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*

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

4. Verification

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

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

Comment: _____

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

City of San Jose

3. Recipients

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

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

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role ☐ Other ☐ 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 ☐ *If checking "Ceremonial Role" or "Other" describe below:*
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*

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

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

Name	Organization	# of Tickets	Public Purpose	Signature
[redacted]	[redacted]	[redacted]	[redacted]	[redacted]
CLAY POON	City of San José	2 - Suite	2019 Green Commute Challenge	
Lisa Rice	City of San José	2 - Suite	2019 Green Commute Challenge	
[redacted]	[redacted]	[redacted]	[redacted]	[redacted]
Gabriel Borden	City of San José	2 - Suite	2019 Green Commute Challenge	
Delilah Chavez	City of San José	2 - Suite	2019 Green Commute Challenge	
Tascha Mattes	City of San José	2 – Suite	2019 Green Commute Challenge	
[redacted]	[redacted]	[redacted]	[redacted]	[redacted]
Lorena Diez	City of San José	2 – Lower Level	2019 Green Commute Challenge	
Selena Copeland	City of San José	2 – Lower Level	2019 Green Commute Challenge	
Robert Lopez	City of San José	2 – Lower Level	2019 Green Commute Challenge	
STEVE PENDLETON	City of San José	2 – Lower Level	2019 Green Commute Challenge	

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

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

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

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Date of Original Filing: _____ *(month, day, year)*

1. Agency Name

City of San José

Division, Department, or Region *(if applicable)*

Housing Department

Designated Agency Contact *(Name, Title)*

Maria Malloy, Analyst

Area Code/Phone Number	**E-mail**
408-975-4413	maria.malloy@sanjoseca.gov

2. Function or Event Information

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

Event Description: Ariana Grande Concert *(Provide Title/ Explanation)* Date(s) 05 / 02 / 19 ___/___/___

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

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

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
City of San José Housing Department	16	16 suite tickets to recognize staffs efforts in organizing and participating in the 2018 Green Commute Challenge.

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*

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

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.

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

Comment: _____

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

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Agency Name

City of San José

3. Recipients

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

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

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role ☐ Other ☐ 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 ☐ *If checking "Ceremonial Role" or "Other" describe below:*
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*

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

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

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

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Ceremonial Role Events and Ticket/Pass Distributions

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Date of Original Filing: _____ *(month, day, year)*

1. Agency Name

City of San José

Division, Department, or Region *(if applicable)*

Housing Department

Designated Agency Contact *(Name, Title)*

Maria Haase, Analyst

Area Code/Phone Number	E-mail
408-975-4413	maria.haase@sanjoseca.gov

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass $ 85.00

Event Description: Pentatonix *(Provide Title/ Explanation)* Date(s) 10 / 17 / 16 ___/___/___

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

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

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
City of San José Housing Department	16	16 tickets to recognize staff for their contributions in the Department's Recognition Team.

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*

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

4. Verification

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

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

Comment: _____

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

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

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

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1. Agency Name

City of San Jose

Division, Department, or Region *(if applicable)*

Housing Department

Designated Agency Contact *(Name, Title)*

Maria Malloy, Analyst

Area Code/Phone Number	E-mail
408-975-4413	maria.malloy@sanjoseca.gov

☐ **Amendment** *(Must Provide Explanation in Part 3.)*

Date of Original Filing: _____ *(month, day, year)*

2. Function or Event Information

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

Event Description: Sharks Vs Vegas Golden Nights *Provide Title/ Explanation* Date(s) 03 / 22 / 18 ___/___/___

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

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

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
City of San Jose Housing Department	16	16 suite tickets to recognize staff efforts to obtain a grant through Affordable Housing Sustainable Communities.
City of San Jose Housing Department	8	8 Lower Level tickets - same purpose as listed above

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*

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

4. Verification

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

Signature of Agency Head or Designee	Print Name	Title	*(month, day, year)*
[signature]	Jacky Morales-Ferrand	Director of Housing	3/22/18

Comment: _____

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

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Agency Name

City of San Jose

3. Recipients

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

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

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role ☐ Other ☐ 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 ☐ *If checking "Ceremonial Role" or "Other" describe below:*
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*

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

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

Name	Organization	# of Tickets	Public Purpose	Signature
[redacted] Kevin O'Connor	City of San José	2	Housing Related Efforts in San José	
James Stagi	City of San José	2	Housing Related Efforts in San José	
Samantha Luke	Charities Housing	2	Housing Related Efforts in San José	
Kathy Robinson	Charities Housing	2	Housing Related Efforts in San José	
Regina Williams	First Community Housing	2	Housing Related Efforts in San José	
Zahir Gulzadah	City of San José	2	Housing Related Efforts in San José	
Mark Gerhardt	City of San José	2	Housing Related Efforts in San José	
Jaki Joanino	City of San José	2	Housing Related Efforts in San José	

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Ceremonial Role Events and Ticket/Pass Distributions

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Date of Original Filing: _____ *(month, day, year)*

1. Agency Name

City of San José

Division, Department, or Region *(if applicable)*

Housing Department

Designated Agency Contact *(Name, Title)*

Maria Malloy, Analyst

Area Code/Phone Number	E-mail
408-975-4413	maria.malloy@sanjoseca.gov

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐

Face Value of Each Ticket/Pass $ unknown

Event Description: Jingle Ball
Provide Title/ Explanation

Date(s) 11 / 30 / 17 ___/___/___

Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐

If no: _____
Name of Source

Was ticket distribution made at the behest of agency official? Yes ☐ No ☒

If yes: _____
Official's Name (Last, First)

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
City of San José Housing Department	16	16 tickets to recognize staff for efforts to obtain a grant through Affordable Housing Sustainable Communities, and
		staff who participated in the Winter Storm Resource Fair as translators for the City Manager's Office.

B. 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:*
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*

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

4. Verification

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

Signature of Agency Head or Designee	Print Name	Title	*(month, day, year)*
	Jacky Morales-Ferrand	Director of Housing	11/30/17

Comment: _____

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

City of San José

3. Recipients

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

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

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role ☐ Other ☐ 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 ☐ *If checking "Ceremonial Role" or "Other" describe below:*
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*

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

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

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

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

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

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

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Date of Original Filing: _____ *(month, day, year)*

1. Agency Name

City of San José

Division, Department, or Region *(if applicable)*

Housing Department

Designated Agency Contact *(Name, Title)*

Maria Haase, Analyst

Area Code/Phone Number	E-mail
408-975-4413	maria.haase@sanjoseca.gov

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass $ 179.50

Event Description: Drake Concert *(Provide Title/ Explanation)* Date(s) 09 / 25 / 16 ___/___/___

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

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

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
City of San José Housing Department	16	16 tickets to recognize staff for their contributions in the Department's Recognition Team.

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*

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

4. Verification

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

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

Comment: _____

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

Name	Organization	Face Value per Ticket	# of Tickets	Public Purpose	Signature
Lorena Negrete	CSJ Housing Department	$179.50	2	Housing Recognition Team - Recognition	
Tascha Mattos	CSJ Housing Department	$179.50	2	Housing Recognition Team - Recognition	
Kelly Hemphill	CSJ Housing Department	$179.50	2	Housing Recognition Team - Recognition	
Aurelia Bailey	CSJ Housing Department	$179.50	2	Housing Recognition Team - Recognition	
Isaac Orona	CSJ Housing Department	$179.50	2	Housing Recognition Team - Recognition	
Delilah Chavez	CSJ Housing Department	$179.50	2	Housing Recognition Team - Recognition	
Korey Richardson	CSJ Housing Department	$179.50	2	Housing Recognition Team - Recognition	
[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]
Lorena Lopez	CSJ Housing Dept.	$179.50	2	Housing Rec Team - Recognition	

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1. Agency Name

City of San Jose

Division, Department, or Region *(If Applicable)*

Housing Department

Designated Agency Contact *(Name, Title)*

Maria Haase, Assistant to the Director / Analyst

Area Code/Phone Number	E-mail
408-975-4413	maria.haase@sanjoseca.gov

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☐ **Amendment** *(Must provide explanation in Part 3.)*

Date of Original Filing: _____ *(Month, Day, Year)*

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐

Face Value of Each Ticket/Pass $ 153.00

Event Description Sharks vs Canucks *Provide Title/Explanation*

Date(s) 3 / 7 / 15 ___/___/___

Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐

If no: _____ *Name of Source*

Was ticket distribution made at the behest of agency official? No ☐ Yes ☒

If yes: _____ *Official's Name (Last, First)*

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy
City of San Jose Housing Department	8	8 tickets to recognize staff for their efforts in passing a Housing Impact Fee.

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Pass(es)	Identify one of the following:
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*

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

4. Verification

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

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

Comment: _____

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

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Agency Name

City of San Jose

3. Recipients

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

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

B. Name of Individual (Last, First)	Number of Ticket(s)/ Pass(es)	Identify one of the following:
		Ceremonial Role ☐ Other ☐ 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 ☐ *If checking "Ceremonial Role" or "Other" describe below:*
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*

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

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

Name	Organization	Face Value per Ticket	# of Tickets	Public Purpose	Signature
[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]
Kristen Clements	CSJ Housing Department	$153.00	2	Housing Impact Fee Recognition	Kristen Clements
Maria Haase	CSJ Housing Department	$153.00	2	Housing Impact Fee Recognition	Maria Haase
Lisa Rice	CSJ Attorneys Office	$153.00	2	Housing Impact Fee Recognition	Lisa Rice
Karla Caceres	CSJ Housing Dept.	$153.00	2	Employee of the Year 2014	Karla Caceres

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

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1. Agency Name

City of San Jose

Division, Department, or Region *(If Applicable)*

Housing Department

Designated Agency Contact *(Name, Title)*

Maria Haase, Assistant to the Director / Analyst

Area Code/Phone Number	**E-mail**
408-975-4413	maria.haase@sanjoseca.gov

☐ **Amendment** *(Must provide explanation in Part 3.)*

Date of Original Filing: _____ *(Month, Day, Year)*

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐

Face Value of Each Ticket/Pass $ 98

Event Description Bob Seger Concert
Provide Title/Explanation

Date(s) 3 / 5 / 15 ___/___/___

Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐

If no: _____
Name of Source

Was ticket distribution made at the behest of agency official? No ☐ Yes ☒

If yes: _____
Official's Name (Last, First)

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy
City of San Jose Housing Department	16	16 tickets to recognize staff for their efforts in passing a Housing Impact Fee and co-chairs of the Departments Recognition Team.

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Pass(es)	Identify one of the following:
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*

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

4. Verification

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

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

Comment: _____

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

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Agency Name

City of San Jose

3. Recipients

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

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

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Pass(es)	Identify one of the following:
		Ceremonial Role ☐ Other ☐ 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 ☐ *If checking "Ceremonial Role" or "Other" describe below:*
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*

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

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

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

Leif Regvall CSJ Housing Dept $98.00

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

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1. Agency Name

City of San Jose

Division, Department, or Region *(If Applicable)*

Housing Department

Designated Agency Contact *(Name, Title)*

Maria Haase, Assistant Director of Housing / Analyst

Area Code/Phone Number	E-mail
408-975-4413	maria.haase@sanjoseca.gov

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Date Stamp

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☐ **Amendment** *(Must provide explanation in Part 3.)*

Date of Original Filing: _____ *(Month, Day, Year)*

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐

Face Value of Each Ticket/Pass $ 139.00

Event Description Sharks vs. Tampa Bay Lightning
Provide Title/Explanation

Date(s) 11 / 21 / 13 ___/___/___

Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐

If no: _____
Name of Source

Was ticket distribution made at the behest of agency official? No ☐ Yes ☒

If yes: _____
Official's Name (Last, First)

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy
City of San Jose Housing Department	8	8 tickets to recognize staff of the Neighborhood Stabilization Program and the Housing Impact Fee Team.

B. Name of Individual (Last, First)	Number of Ticket(s)/ Pass(es)	Identify one of the following:
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*

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

4. Verification

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

Signature of Agency Head or Designee	Print Name	Title	(Month, Day, Year)
	Leslye Corsiglia	Director of Housing	11/14/13

Comment: _____

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

California Form 802

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Agency Name

City of San Jose

3. Recipients

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

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

B. Name of Individual (Last, First)	Number of Ticket(s)/ Pass(es)	Identify one of the following:
		Ceremonial Role ☐ Other ☐ 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 ☐ *If checking "Ceremonial Role" or "Other" describe below:*
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*

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

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

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

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

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1. Agency Name

City of San Jose

Division, Department, or Region *(If Applicable)*

Housing Department

Designated Agency Contact *(Name, Title)*

Maria Haase, Assistant to the Director/Analyst II

Area Code/Phone Number	E-mail
408-975-4413	maria.haase@sanjoseca.gov

Date Stamp
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☐ **Amendment** *(Must provide explanation in Part 3.)*

Date of Original Filing: _____ *(Month, Day, Year)*

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐

Face Value of Each Ticket/Pass $ 139 or 192

Event Description NSP II / Recognition
Provide Title/Explanation

Date(s) 10 / 19 / 13 11 / 02 / 13

Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐

~~If no~~: Additional date 11/05/13
Name of Source

Was ticket distribution made at the behest of agency official? No ☐ Yes ☒

If yes: Debra Figone
Official's Name (Last, First)

3. Recipients

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy
City of San Jose, Housing Department	40	24 tix for 10/19/13, 8 tix for 11/2/13, and 8 tix for 11/5/13 to recognize the staff of the Neighborhood Stabilization Program

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Pass(es)	Identify one of the following:
See Attached		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:* See Attached
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*

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

4. Verification

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

Signature of Agency Head or Designee	Print Name	Title	(Month, Day, Year)
	Leslye Corsiglia	Director of Housing	10/22/13

Comment: _____

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

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Agency Name See attached

3. Recipients

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

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

B. Name of Individual (Last, First)	Number of Ticket(s)/ Pass(es)	Identify one of the following:
		Ceremonial Role ☐ Other ☐ 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 ☐ *If checking "Ceremonial Role" or "Other" describe below:*
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*

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

Tickets Provided by
Agency Report
Continuation Sheet

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3. Agency Official(s) Receiving Ticket(s)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
Murillo, Daniel	2	NSP 2 Recognition
Butt, Rahil	2	NSP 2 Recognition
Tiet, Yen	2	NSP 2 Recognition
Aquino, Olivia	2	NSP2 Recognition
Yav, Amy	2	NSP2 Recognition
James Stagi	2	NSP2 Recognition
Korey Richardson	2	NSP2 recognition
Supan, William	2	"
Carlos Azcona	2	NSP 2 "
Rachel VanderVeen	2	" "
Isaac Brona	2	NSP2 " "
Dan Beaton	2	" " "
Maria Haase	2	NSP2 Recognition
Tomasa Moreno	2	NSP2 " "
Jacky Morales-Ferrel	2	NSP2 Recognition