## 1. Agency Name

San Jose Police Department

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

Airport Division

**Designated Agency Contact (Name, Title)**

Sergeant Brett Myers

**Area Code/Phone Number**

(408) 506-7879

**E-mail**

3350@sanjoseca.gov

## 2. Function or Event Information

**Does the agency have a ticket policy?**

Yes [x] No [ ]

**Event Description:**

San Jose Sharks Game

**Face Value of Each Ticket/Pass**

$240.00

**Date(s)**

01/11/20

## 3. Recipients

### A. Name of Agency, Department or Unit

<table>
<thead>
<tr>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>San Jose Police Department</td>
<td>16 Appreciation for dedicated work</td>
</tr>
<tr>
<td>Airport Division</td>
<td></td>
</tr>
</tbody>
</table>

### B. Name of Individual (Last, First)

<table>
<thead>
<tr>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
</tr>
</tbody>
</table>

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)

<table>
<thead>
<tr>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## 4. Verification

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

**Signature of Agency/Head of Designee:**

Sgt. Brett Myers

**Print Name:**

Sergeant Brett Myers

**Title:**

Sergeant

**Date:**

12/24/19

**Comment:**

FPPC Form 802 (2/2016)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
City of San Jose
Division, Department, or Region (If applicable)
Police Department
Designated Agency Contact (Name, Title)
Edgardo Garcia, Chief of Police

2. Function or Event Information
Does the agency have a ticket policy? Yes ☑ No ☐
Face Value of Each Ticket/Pass $69
Event Description: First Responders Appreciation Day
Date(s) 12/15/19
Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐
Was ticket distribution made at the behest of agency official? Yes ☑ No ☐

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

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acosta, Javier</td>
<td>2</td>
<td>Ceremonial Role ☑ Other ☐ Income ☐</td>
</tr>
<tr>
<td>Lao, Leonard</td>
<td>2</td>
<td>Ceremonial Role ☑ Other ☐ Income ☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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.

D. Osyler (Signature of Agency Head or Designee)
D. Sykes (Print Name)
CITY MANAGER (Title) 12/20/19 (month, day, year)

Comment: ________________________________
### 3. Recipients

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

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
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</thead>
<tbody>
<tr>
<td></td>
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<td></td>
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<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Orozco, Jaime</td>
<td>2</td>
<td>Ceremonial Role [x] Other [ ] Income [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>On-field flag presentation during National Anthem as part of First Responder Appreciation Day</td>
</tr>
<tr>
<td>Short, Michael</td>
<td>0</td>
<td>Ceremonial Role [x] Other [ ] Income [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>On-field flag presentation during National Anthem as part of First Responder Appreciation Day</td>
</tr>
<tr>
<td>Solomon, Maria</td>
<td>2</td>
<td>Ceremonial Role [x] Other [ ] Income [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>On-field flag presentation during National Anthem as part of First Responder Appreciation Day</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions
A Public Document

1. Agency Name
City of San Jose
Division, Department, or Region (If applicable)
San Jose Police Department
Designated Agency Contact (Name, Title)
Chief Edgardo Garcia, Police Chief
Area Code/Phone Number
(408) 535-8100
E-mail
webmaster.manager@sanjoseca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes X No □
Face Value of Each Ticket/Pass $ $83 & $240
Event Description: San Jose Sharks Hockey Game
Date(s) 11/1/19
Ticket(s)/Pass(es) provided by agency? Yes X No □
If no:
Name of Source
If yes:
Was ticket distribution made at the behest of agency official? Yes □ No □
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
San Jose Police Department, BFO Field Training & Evaluation Program
Number of Ticket(s)/Passes
22
Describe the public purpose made pursuant to the agency's policy
Recognition for public service

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:

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
D. Odys
Print Name
D. Sykes
Title
City Manager
1/7/20
(month, day, year)

Comment:
<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Quantity of Tickets</th>
</tr>
</thead>
<tbody>
<tr>
<td>DelliCarpini</td>
<td>Tori</td>
<td>1</td>
</tr>
<tr>
<td>Walias</td>
<td>Tom</td>
<td>1</td>
</tr>
<tr>
<td>Perry</td>
<td>James</td>
<td>1</td>
</tr>
<tr>
<td>Singh</td>
<td>Pranil</td>
<td>1</td>
</tr>
<tr>
<td>Biebel</td>
<td>Robert</td>
<td>1</td>
</tr>
<tr>
<td>McNair</td>
<td>Jeff</td>
<td>1</td>
</tr>
<tr>
<td>Santiago</td>
<td>Jorge</td>
<td>1</td>
</tr>
<tr>
<td>Valverde</td>
<td>Jonathan</td>
<td>1</td>
</tr>
<tr>
<td>Sanchez</td>
<td>Omar</td>
<td>1</td>
</tr>
<tr>
<td>Miramontes</td>
<td>Isaac</td>
<td>1</td>
</tr>
<tr>
<td>Welker</td>
<td>Jessica</td>
<td>1</td>
</tr>
<tr>
<td>Maldonado</td>
<td>Eduardo</td>
<td>1</td>
</tr>
<tr>
<td>Dinh</td>
<td>Hung</td>
<td>1</td>
</tr>
<tr>
<td>Shab</td>
<td>Brian</td>
<td>2</td>
</tr>
<tr>
<td>White</td>
<td>Phil</td>
<td>1</td>
</tr>
<tr>
<td>Mangonon</td>
<td>Eddy</td>
<td>2</td>
</tr>
<tr>
<td>Johnson</td>
<td>Scott</td>
<td>2</td>
</tr>
<tr>
<td>Robertson</td>
<td>Mike</td>
<td>2</td>
</tr>
</tbody>
</table>
## 1. Agency Name
San Jose Police Department

**Division, Department, or Region (if applicable)**
Family Violence Unit

**Designated Agency Contact (Name, Title)**
Steve Slack, Sergeant

**Area Code/Phone Number**
(408)-277-3700

**E-mail**
steven.slack@sanjoseca.gov

### 2. Function or Event Information

- **Function/Event Information**: Luke Combs concert
- **Face Value of Each Ticket/Pass**: $45
- **Date(s)**: 11/6/19
- **Ticket(s)/Pass(es) provided by agency?** Yes
- **Was ticket distribution made at the behest of agency official?** Yes

### 3. Recipients

**A. Name of Agency, Department or Unit**

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>SJPD Family Violence Unit</td>
<td>20</td>
<td>Recognition for outstanding work performance</td>
</tr>
</tbody>
</table>

**B. Name of Individual**

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role □ Other □ Income □</td>
</tr>
</tbody>
</table>

If checking "Ceremonial Role" or "Other" describe below:

**C. Name of Outside Organization**

<table>
<thead>
<tr>
<th>Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 4. Verification

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

Signature of Agency Head or Designee: [Signature]
Print Name: [Name]
Title: [Title]
Date: 11/5/19

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

1. Agency Name
City of San Jose

Division, Department, or Region (if applicable)
San Jose Police Department

Designated Agency Contact (Name, Title)
Chief Edgardo Garcia, Police Chief

Area Code/Phone Number
(408) 535-8100

E-mail
webmaster.manager@sanjoseca.gov

2. Function or Event Information

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

Event Description: San Jose Sharks Hockey Game

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

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

3. Recipients

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Police Amateur Athletic Foundation 501(c)(3)</td>
<td>4</td>
<td>Recognizing volunteer public service</td>
</tr>
</tbody>
</table>

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)
1. Agency Name
City of San Jose

Division, Department, or Region (if applicable)
San Jose Police Department

Designated Agency Contact (Name, Title)
Chief Edgardo Garcia, Police Chief

Area Code/Phone Number E-mail
(408) 535-8100 webmaster.manager@sanjoseca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☑ No ☐

Event Description: San Jose Sharks Hockey Game

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

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

Date(s) 1/7/19

Face Value of Each Ticket/Pass $170.00

3. Recipients

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Doxie, Tara</td>
<td>2</td>
<td>Income ☐ Ceremonial Role ☑</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Recognizing volunteer public service</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
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<tbody>
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<td></td>
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</table>

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

Comment:
Agency Name: City of San Jose

Division, Department, or Region (if applicable): San Jose Police Department

Designated Agency Contact (Name, Title): Chief Edgardo Garcia, Police Chief

Area Code/Phone Number: (408) 535-8100

E-mail: webmaster.manager@sanjoseca.gov

1. Function or Event Information

- Does the agency have a ticket policy? Yes [x] No [ ]
- Event Description: San Jose Sharks Hockey Game
  - Provide Title/Explanation
  - Ticket(s)/Pass(es) provided by agency? Yes [x] No [ ]
  - Face Value of Each Ticket/Pass $170.00
  - Date(s): 11/15/18
  - Name of Source
  - Was ticket distribution made at the behest of agency official? Yes [ ] No [x]

2. Recipients

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Ceremonial Role [ ] Other [x] Income [ ]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arana, Erin</td>
<td>1</td>
<td>Recognizing volunteer public service</td>
</tr>
<tr>
<td>Allen, Neal</td>
<td>1</td>
<td>Recognizing volunteer public service</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

3. 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: D. SYKES
Print Name: D. SYKES
Title: City Manager
Date: 8/22/19

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

1. Agency Name
City of San Jose

Division, Department, or Region (if applicable)
San Jose Police Department

Designated Agency Contact (Name, Title)
Chief Edgardo Garcia, Police Chief

Area Code/Phone Number E-mail
(408) 535-8100 webmaster.manager@sanjoseca.gov

2. Function or Event Information

Does the agency have a ticket policy? Yes [X] No [ ]

Event Description: San Jose Sharks Hockey Game

Ticket(s)/Pass(es) provided by agency? Yes [X] No [ ]

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

Face Value of Each Ticket/Pass $170.00

Date(s) 11/13/18

3. Recipients

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

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

B. Name of Individual (Last, First) Number of Ticket(s)/ Passes Identify one of the following:

Potwora, Douglas 2 Ceremonial Role [ ] Other [X] Income [ ]

Recognizing volunteer public service

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] [Print Name] [Title] 8/22/19

Comment: ______________________________________________________________________________________
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions
A Public Document

1. Agency Name
SAN JOSE PD
BOI- FINANCIAL CRIMES

Division, Department, or Region (if applicable)

Designated Agency Contact (Name, Title)
LT. E. PEDREIRA #3104 / SGT BRAVO #3312

Area Code/Phone Number 408-277-4401
E-mail 3104@SANJOSECA.GOV
3312@SANJOSECA.GOV

2. Function or Event Information

Does the agency have a ticket policy? Yes □ No □
Face Value of Each Ticket/Pass $ 99.00

Event Description: Concert/Foo Fighters
Date(s) 9/12/18

Ticket(s)/Pass(es) provided by agency? Yes □ No □
If no: __________________________________________

Was ticket distribution made at the behest of agency official?
Yes □ No □
If yes: __________________________________________

3. Recipients

A. Name of Agency, Department or Unit
CIT OF SAN JOSE, SAN JOSE PD- FINANCIAL CRIMES UNIT

Number of Ticket(s)/Passes 16

Describe the public purpose made pursuant to the agency's policy

B. Name of Individual (Last, First)

Number of Ticket(s)/Passes

Identify one of the following:
Ceremonial Role □ Other □ Income □

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 Richard Bravo #3104
Title Sergeant

Date of Original Filing: ________________________

Comment: __________________________________

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
City of San Jose
San Jose Police Dept

Designated Agency Contact (Name, Title)
Sgt Jodi Williams

Area Code/Phone Number E-mail
408-277-4161 3571@sanjoseca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☑ No ☐
Face Value of Each Ticket/Pass $ UNK
Event Description: San Jose Sharks Game
Date(s) 11/01/17
Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐
Was ticket distribution made at the behest of agency official? Yes ☑ No ☐
Name of Source
San Jose Police
Official's Name (Last, First)

3. Recipients
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, San Jose Police Dept 24 #4 Recognition for direct involvement in city related projects/programs

B. Name of Individual (Last, First) Number of Ticket(s)/Passes Identify one of the following:

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.
Sgt J. Williams Police Sergeant 11/13/2017

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

1. Agency Name
SAN JOSE POLICE DEPARTMENT
Division, Department, or Region (if applicable)
FAMILY VIOLENCE UNIT
Designated Agency Contact (Name, Title)
LT. TIBALDI
Area Code/Phone Number E-mail
- 3698@ SANJOSECA.GOV

2. Function or Event Information
Does the agency have a ticket policy? Yes[ ] Non[ ]
Face Value of Each Ticket/Pass $ 150
Event Description: THE WEEKEND CONCERT
Date(s) 4/28/17
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.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAN JOSE POLICE FAMILY VIOLENCE UNIT</td>
<td>16</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role[ ] Other[ ] Income[ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role[ ] Other[ ] Income[ ]</td>
</tr>
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</tr>
</tbody>
</table>

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
Date 4/20/17

Comment: 

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
1. Agency Name
   City of San Jose

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

Designated Agency Contact (Name, Title)
   Chief Eddie Garcia, Police Chief

Area Code/Phone Number
   (408) 535-8111

E-mail
   webmaster.manager@sanjoseca.gov

2. Function or Event Information

Does the agency have a ticket policy?  Yes [X]  No [ ]

Face Value of Each Ticket/Pass $ 43.00

Event Description: San Jose Sharks vs. St. Louis Blues
   Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency?  Yes [X]  No [ ]

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

Date(s) 3/16/17

If no: Bay Area Law Enforcement Assistance Fund
   Name of Source

If yes: Officer’s Name (Last, First)

3. Recipients

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

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
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<tr>
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<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Officer Alan Yee, SJPD</td>
<td>1</td>
<td>Ceremonial Role [ ]  Other [X] Income [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>San Jose Sharks First Responder Night</td>
</tr>
</tbody>
</table>

| Officer Jason Wellman, SJPD         | 1                         | Ceremonial Role [ ]  Other [X] Income [ ] |
|                                     |                           | San Jose Sharks First Responder Night |

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
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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  
Date (month, day, year)  

Comment:  

FPPC Form 802 (2/2016)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
### Agency Report of:

**Ceremonial Role Events and Ticket/Pass Distributions**

**A Public Document**

---

1. **Agency Name**
   - SAN JOSE POLICE DEPT.

2. **Division, Department, or Region (if applicable)**
   - POLICE - BOMB SQUAD

3. **Designated Agency Contact (Name, Title)**
   - GCT, ROB LANG

4. **Area Code/Phone Number**
   - 408-476-8709

5. **E-mail**
   - 3279@SANJOS@CA. GOV

---

2. **Function or Event Information**

   **Does the agency have a ticket policy?**
   - Yes [x] No [ ]

   **Event Description:**
   - BLAKE SHELTON CONCERT

   **Date(s):**
   - 3/10/17

   **Provide Title/Explanation**

   **Ticket(s)/Pass(es) provided by agency?**
   - Yes [x] No [ ]

   **If no:**
   - Name of Source

   **Was ticket distribution made at the behest of agency official?**
   - Yes [x] No [ ]

     **If yes:**
     - Name of Source: LT CHRI$ MOHAN

---

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**
   - SJPD BOMB SQUAD
   - Number of Ticket(s)/Passes: 8

   **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:**

   **C. Name of Outside Organization (include address and description)**
   - Number of Ticket(s)/Passes

     **Describe the public purpose made pursuant to the agency's policy**

---

4. **Verification**

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

   **Signature of Agency Head or Designee:**
   - [Signature]

   **Print Name:**
   - LIEUTENANT

   **Title:**
   - 3-9-2017

   **Comment:**
   - [Comment]

---

FPPC Form 802 (2/2016)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Name: San Jose Police Department

Division, Department, or Region (if applicable): BFO

Designated Agency Contact (Name, Title): Lieutenant Jeff Profo

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

Function or Event Information:

Does the agency have a ticket policy? Yes ☑ No ☐ Face Value of Each Ticket/Pass $ 303.00

Event Description: Bellator MMA Date(s) 02/18/17

Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐ If no:

Was ticket distribution made at the behest of agency official? Yes ☑ No ☐ If yes:

Recipients:

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

San Jose Police Department 24

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:

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

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: Lt. Jeff Profo

Print Name: Lt. Jeff Profo

Title: Lieutenant

Date: 02/25/2017

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

1. Agency Name
City of San Jose
Division, Department, or Region (if applicable)
San Jose Police Department
Designated Agency Contact (Name, Title)
Chief Edgardo Garcia, Police Chief
Area Code/Phone Number
(408) 535-8100
E-mail
webmaster.manager@sanjoseca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☒ No ☐
Face Value of Each Ticket/Pass: $149
Event Description: San Jose Sharks hockey game
Date(s): 11/05/16
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

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:

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
Police Amateur Athletic Foundation 501(c)(3)
PO Box 721115, San Jose, CA 95172
4 Attracting and recognizing volunteer public service

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
Comment:

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   City of San Jose
   San Jose Police Department
   Chief Edgardo Garcia, Police Chief

   Area Code/Phone Number: (408)535-8100
   E-mail: webmaster.manager@sanjoseca.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Face Value of Each Ticket/Pass $149.00
   Event Description: San Jose Sharks Hockey Game
   Event Date(s): 10/25/16
   Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐
   If no:
   Name of Source
   If yes:
   Official's Name (Last, First)

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

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

   B. Name of Individual
      (Last, First)
      Number of Ticket(s)/Passes
      Identify one of the following:
      Ceremonial Role ☐ 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

      Police Amateur Athletic Foundation (501(c)(3))
      P.O. Box 721115, San Jose, CA 95172
      4
      Attracting and recognizing volunteer public service

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

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

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

1. Agency Name
SAN JOSE POLICE DEPARTMENT
TRAINING DIVISION

Designated Agency Contact (Name, Title)
SGT. CHRIS WILSON

Area Code/Phone Number 408.501.0960
E-mail 2402@SANTOSECA.GOV

2. Function or Event Information

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

Event Description SHARKS HOME

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

Was ticket distribution provided at the behest of agency official?

Date(s) 6/4/16

Face Value of Each Ticket/Pass $ (667.14) 334.50

3. Recipients

A. Name of Agency, Department or Unit

Number of Ticket(s)/Pass(es)

Describe the public purpose made pursuant to the agency's policy

SJPD TRAINING RECRUITING 24 EMPLOYEE RECOGNITION

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:

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 L.T. K. SAREL̄LA
Print Name LIEUTENANT
Title 6/4/16
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
San Jose Police Dept.

Division, Department, or Region (If Applicable)
BFO Chief's Office

Designated Agency Contact (Name, Title)
Michelle Martinez - Staff Specialist

Area Code/Phone Number Email
408-597-1802 michelle.martinez@sanjov.org

Date Stamp
California Form 802
For Official Use Only

2. Function or Event Information
Does the agency have a ticket policy? Yes ☐ No ☐

Face Value of Each Ticket/Pass $ 169.50

Event Description Trans Siberian Orchestra

Date(s) 12/3/2015

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

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>BFO Chief's Office</td>
<td>16</td>
<td>Good work of employees</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
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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
Johnson Feing 270

Print Name
Police Lieutenant

Title
(Month, Day, Year)
12-1-2015

Comment: 

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
**Agency Report of:**
Ceremonial Role Events and Ticket/Pass Distributions

1. **Agency Name**
   San Jose Police Department
   Bureau of Investigations/ Covert Response Unit

2. **Function or Event Information**
   - Does the agency have a ticket policy? **Yes**
   - Event Description: Nitro Circus - SAP Center
   - Ticket(s)/Pass(es) provided by agency? **Yes**
   - Face Value of Each Ticket/Pass: $102.00
   - Date(s): 11/15

3. **Recipients**
   - San Jose Police Department, Covert Response Unit
     Number of Ticket(s)/Pass(es): 24
     Description: Recognition and reward for outstanding police work to the Covert Response Unit and support staff.

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**
   **Tyler Krauel**
   **Police Officer**

   **Date of Original Filing:** 11-17-15

   **Comment:**

---

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions 

1. Agency Name 
SANT JOSE POLICE DEPARTMENT 
Division, Department, or Region (If Applicable) 

Sgt. Mario Beasli 
Designated Agency Contact (Name, Title) 

BUREAU OF FIELD OPERATIONS UNIT 

Area Code/Phone Number: 408-718-0967 
E-mail: ss5s@sanjoseca.gov 


2. Function or Event Information 

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

Event Description: San Jose Sharks Game 

Face Value of Each Ticket/Pass $ __________ 

Date(s): 11/3/15 

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

If no: San Jose Arena Authority 
Name of Source 

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

If yes: Sgt. Mario Beasli 
Official's Name (Last, First) 

3. Recipients 

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

<table>
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</thead>
<tbody>
<tr>
<td>San Jose Police Dept.</td>
<td>24</td>
<td>Reward for specific outstanding</td>
</tr>
<tr>
<td>Downtown Services Unit</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
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<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐</td>
<td>Income ☐</td>
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<td></td>
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<td>Income ☐</td>
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4. Verification 

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

Signature of Agency Head or Designee: ____________________________ 
Print Name: ____________________________ Title: ____________________________ (Month, Day, Year) 

Comment: ____________________________
### 1. Agency Name

**San Jose Police Department**

**Division, Department, or Region (If Applicable):** BF0 - Administrative Unit

**Designated Agency Contact (Name, Title):** Jon Hartman - Police Sergeant

**Area Code/Phone Number:** 408-277-5322

**E-mail:** 3315 @ San Jose Ca. Gov

**Date Stamp:** 2013 FEB 18 AM 9:27

### 2. Function or Event Information

- **Does the agency have a ticket policy?** Yes [X] No [ ]
- **Event Description:** Sharks vs. Ducks
- **Face Value of Each Ticket/Pass:** $206.00
- **Date(s):** 1/29/15
- **Ticket(s)/Pass(es) provided by agency?** Yes [X] No [ ]
- **Was ticket distribution made at the behest of agency official?** No [ ] Yes [X]

### 3. Recipients

**A. Name of Agency, Department or Unit**

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<th>Describe the public purpose made pursuant to the agency's policy</th>
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<tbody>
<tr>
<td>24</td>
<td>For Excellent Work</td>
</tr>
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</table>

**B. Name of Individual**

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<tr>
<th>Number of Ticket(s)/Pass(es)</th>
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**C. Name of Outside Organization**

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### 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:** Johnson Fong

**Title:** Police Lieutenant

**Date:** 2-10-15

**Comment:**

FPPC Form 802 (4/12)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   San Jose Police Dept.
   Division, Department, or Region (If Applicable)
   METRO DIV.
   Designated Agency Contact (Name, Title)
   SGT. Mike Carlson
   Area Code/Phone Number (408-277-4161)
   E-mail CARLSON@SJSU.SG

2. Function or Event Information
   Does the agency have a ticket policy? Yes [ ] No [X]
   Event Description: Sharks Game
   Provide Title/Explanation
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [X]
   Face Value of Each Ticket/Pass $ 192.00
   Date(s) 3/18/14
   Name of Source
   Was ticket distribution made at the behest of agency official? No [X] Yes [ ]
   If yes: AGENA AUTHORITY
   Official's Name (Last, First)

3. Recipients
   A. Name of Agency, Department or Unit Number of Ticket(s)/Pass(es) Describe the public purpose made pursuant to the agency's policy
      SJPD METRO 24 AWARD FOR QUALITY WORK

   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
   Date (Month, Day, Year)

Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 888/ASK-FPPC (888/275-7772)
### 3. Recipients

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

#### A. Name of Agency, Department or Unit

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#### B. Name of Individual

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<th>Name of Individual (Last, First)</th>
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<td>Ceremonial Role:  Other:  Income:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
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<td></td>
<td>Ceremonial Role:  Other:  Income:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
</tbody>
</table>

#### C. Name of Outside Organization

<table>
<thead>
<tr>
<th>Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### 1. Agency Name
San Jose Police Department

**Division, Dept. or Region (If Applicable):** BFO-patrol

**Designated Agency Contact (Name, Title):** Mike Stahl

**Area Code/Phone Number:** 408-277-4631

**Email:** 3526@sanjoseca.gov

---

**Signature of Agency Head or Designee:**

**Print Name:** Sergeant Mike Stahl

**Title:** Police Sergeant

---

### 2. Function or Event Information

<table>
<thead>
<tr>
<th>Does the agency have ticket policy? (Y/N)</th>
<th>Face Value of each Ticket/Pass</th>
<th>Event Description (Provide Title/Explanation)</th>
<th>Event Date(s)</th>
<th>Ticket(s)/Pass(es) provided by Agency? (Y/N)</th>
<th>If no, list Name of Source</th>
<th>Was ticket distribution made at the behest of agency official? (Y/N)</th>
<th>If yes, list Name of Official (Last, First)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>$125.00</td>
<td>Sharks Game</td>
<td>2/3/2014</td>
<td>No</td>
<td>City of San Jose</td>
<td>Yes</td>
<td>Lt Millard</td>
</tr>
</tbody>
</table>

---

### 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.

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>BFO-Patrol</td>
<td>24</td>
<td>Employee Appreciation</td>
</tr>
</tbody>
</table>

#### B.

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following: (Ceremonial Role, Other, or Inoccent)</th>
<th>Description of &quot;Ceremonial Role&quot; or &quot;Other&quot;</th>
<th>Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mike Stahl</td>
<td>24</td>
<td>Other</td>
<td>Employee</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

**FPPC Form 802x (2012)**

**FPPC Toll-Free Helpline:** 866/ASK-FPPC  www.fppc.ca.gov
### Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

#### 1. Agency Name
City of San Jose  
Division, Department, or Region (If Applicable)  
Office of the Chief of Police - Intelligence Unit  
Designated Agency Contact (Name, Title)  
Paul Woo, Police Sergeant  
Area Code/Phone Number  
408/277-4041  
E-mail  
paul.woo@sanjoseca.gov  

#### 2. Function or Event Information
Does the agency have a ticket policy?  
Yes [X]  No [ ]  

Event Description  
San Jose Sharks Hockey Game  

Ticket(s)/Pass(es) provided by agency?  
Yes [X]  No [ ]  

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

Face Value of Each Ticket/Pass $  
143.00  

Date(s)  
3 / 14 / 13  

Name of Source  

Official's Name (Last, First)  

#### 3. Recipients

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office of the Chief of Police - Intel Unit</td>
<td>24</td>
<td>Employee recognition</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Woo, Paul</td>
<td>2</td>
<td>Other [X]</td>
</tr>
<tr>
<td>Campagna, Joe</td>
<td>2</td>
<td>Employee Recognition</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Santa Clara Police Department</td>
<td>3</td>
<td>Outside police agency recognition for assistance on case</td>
</tr>
<tr>
<td>Santa Clara County Sheriff's Dept</td>
<td>2</td>
<td>Outside police agency recognition for assistance on case</td>
</tr>
</tbody>
</table>

#### 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  

Date of Original Filing:  
3/19/13  

Comment:  

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

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
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</tr>
</tbody>
</table>

#### B. Name of Individual

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>McCarron, George</td>
<td>1</td>
<td>Employee Recognition</td>
</tr>
<tr>
<td>Reckas, Kimberlie</td>
<td>2</td>
<td>Employee Recognition</td>
</tr>
<tr>
<td>Lutticken, Mike</td>
<td>2</td>
<td>Employee Recognition</td>
</tr>
<tr>
<td>Anderson, Dan</td>
<td>2</td>
<td>Employee Recognition</td>
</tr>
</tbody>
</table>

- **Ceremonial Role**
- **Other**
- **Income**

If checking "Ceremonial Role" or "Other" describe below:

#### C. Name of Outside Organization

<table>
<thead>
<tr>
<th>Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
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</tbody>
</table>
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions
Continuation Sheet

Agency Name
City of San Jose

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

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/ Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/ Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tran, Doug</td>
<td>2</td>
<td>Employee Recognition</td>
</tr>
<tr>
<td>Croucher, Matt</td>
<td>2</td>
<td>Employee Recognition</td>
</tr>
<tr>
<td>Welker, Jess</td>
<td>2</td>
<td>Employee Recognition</td>
</tr>
<tr>
<td>Pham, Chau</td>
<td>2</td>
<td>Employee Recognition</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/ Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
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<tr>
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<td></td>
</tr>
</tbody>
</table>
### 1. Agency Name
Santa Clara County Regional Auto Theft Task Force (RATTF)

Division, Department, or Region (If Applicable)
San Jose Police Department, San Jose Ca.

Designated Agency Contact (Name, Title)
Brian Matchett, Sergeant

Area Code/Phone Number
408-421-6770

E-mail
brian.matchett@sanjoseca.gov

### 2. Function or Event Information

<table>
<thead>
<tr>
<th>Does the agency have a ticket policy?</th>
<th>Yes [x] No [ ]</th>
</tr>
</thead>
</table>

Event Description
San Jose Sharks Hockey Game

Ticket(s)/Pass(es) provided by agency?
Yes [ ] No [x]

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

### 3. Recipients

- **A.** Name of Agency, Department or Unit
  - Santa Clara County Regional Auto Theft Task Force (RATTF)
  - Number of Ticket(s)/Pass(es): 24

  Describe the public purpose made pursuant to the agency's policy
  - Use of City owned suite at HP Pavilion for RATTF unit, City Police Department

- **B.** Name of Individual
  - Last, First

- **C.** Name of Outside Organization
  - (Include address and description)

Identify one of the following:

- Ceremonial Role [ ]
- Other [ ]
- Income [ ]

If checking "Ceremonial Role" or "Other" describe below:

Identify one of the following:

- Ceremonial Role [ ]
- Other [ ]
- Income [ ]

If checking "Ceremonial Role" or "Other" describe below:

### 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
Brian Matchett
Sergeant

Date of Original Filing: 02/27/13