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

1. Agency Name
City of San José
Council District 07

2. Function or Event Information
Does the agency have a ticket policy? Yes ☐ No ☐
Event Description: Barracuda vs Heat
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>Number of Ticket(s)/Passes</th>
<th>Name of Agency, Department or Unit</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>Number of Ticket(s)/Passes</th>
<th>Name of Individual (Last, First)</th>
<th>Identify one of the following:</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐</td>
<td>Recognition</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Income ☐</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Number of Ticket(s)/Passes</th>
<th>Name of Outside Organization (include address and description)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Lairan Food Distribution Volunteer Group</td>
<td>Recognition</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]
(month, day, year)

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

1. Agency Name
City of San Jose
Council District 07

Designated Agency Contact (Name, Title)
Mike Medina, Community Relations Manager

Area Code/Phone Number (408) 535-4997
E-mail mike.medina@sanjoseca.gov

2. Function or Event Information

Does the agency have a ticket policy? Yes ☐ No ☐ Face Value of Each Ticket/Pass $ 50.00

Event Description: Barracuda v. Eagles
Date(s): 03/17/20 03/17/20

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

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.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
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</tbody>
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<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
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<tr>
<td></td>
<td></td>
<td>If checking “Ceremonial Role” or “Other” describe below:</td>
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<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
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<td>If checking “Ceremonial Role” or “Other” describe below:</td>
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<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>Alma Community Youth (Include address and description)</td>
<td>4</td>
<td>Recognition</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
Maya Esparza
Print Name
Councilmember
Title
03/13/20 (month, day, year)

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

1. Agency Name
City of San Jose
Council District O
Designated Agency Contact (Name, Title)
Mike Medina, Community Relations Manager
Area Code/Phone Number: (408) 535-4997
E-mail: mike.medina@sanjoseca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☐ No ☐
Event Description: Sharks vs. Devils
Provide Title/Explanation
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐
Face Value of Each Ticket/Pass $ 117.00
Date(s) 02/27/20 02/27/20
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>
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<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
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<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
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<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
<td></td>
<td></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>Los Bomberos</td>
<td>8</td>
<td>Recognition</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: Maya Esparza
Print Name: Councilmember
Title: 07/12/20
(month, day, year)

Comment:
Agency Name: City of San Jose
Division, Department, or Region (if applicable): Council District 7
Designated Agency Contact (Name, Title): Mike Medina, Community Relations Manager
Area Code/Phone Number: (408) 535-4997
E-mail: mike.medina@sanjoseca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes [ ] No [ ]
Face Value of Each Ticket/Pass $67.00
Event Description: Disney on Ice
Date(s): 02/22/20 02/22/20
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 Arena Authority
Name of Official (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
---|---|---
B. Name of Individual (Last, First) | Number of Ticket(s)/Passes | Identify one of the following:
| Ceremonial Role [ ] Other [ ] | Income [ ]
| 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:
Los Pollitos 20 Recognition

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

Signature of Agency Head or Designee: Maya Estes
Print Name: Councilmember Title: (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

City of San Jose
Council District 7

Designated Agency Contact (Name, Title)
Mike Medina, Community Relations

Area Code/Phone Number E-mail
(408) 535-4997 mmedina@sanjose.ca.gov

Division, Department, or Region (if applicable)

Date Stamp: 2020 FEB 9 PM 1:09

For Official Use Only

Amendment (Must Provide Explanation in Part 3.)

2. Function or Event Information

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

Face Value of Each Ticket/Pass $ 50.00

Event Description: Barracuda v. Roadrunners

Date(s) 02/17/20 02/17/20

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

If no: San Jose Arena Authority

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.

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 ☐

Ceremonial Role ☐ Other ☐ Income ☐

- Ceremonial Role ☐ Other ☐ Income ☐

Ceremonial Role ☐ Other ☐ Income ☐

- 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

Birkspreegs Neighborhood 24 | Recognition

4. Verification

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

Signature of Agency Head or Designee: [Signature]

Print Name: [Print Name]

Title: [Title]

Date: 02/13/20 (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
City of San Jose
Division, Department, or Region (if applicable)
Council District 07
Designated Agency Contact (Name, Title)
Mike Medina, Community Relations Manager

2. Function or Event Information
Does the agency have a ticket policy? Yes ☐ No ☑
Face Value of Each Ticket/Pass $ 50.00
Event Description: Barracuda vs. Heat
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
Was ticket distribution made at the behest of agency official? Yes ☐ No ☑

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

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
   Los Arboles Elementary
   Recognition

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

Signature of Agency Head or Designee
Maya Espinosa
Title
02/02/20 (month, day, year)

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

1. Agency Name
City of San Jose
Council District 7

2. Function or Event Information
Does the agency have a ticket policy? Yes [ ] No [ ]
Event Description: BarraCuda v Reigns
Face Value of Each Ticket/Pass $ 50.00
Date(s) 01/08/20

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

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>
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<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
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<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>Tropicana - Lanai, Neighborhood Association</td>
<td>4</td>
<td>Recognition</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 Header Designee: Maya Esperanza
Print Name: Maya Esperanza
Title: Councilmember
Date: 01/13/20

Comment:
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)
Council District 7
Designated Agency Contact (Name, Title)
Andres Quintero, Chief of Staff
Area Code/Phone Number
(408) 535-4985
E-mail
andres.quintero@sanjose.ca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☐ No ☐
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐
Was ticket distribution made at the behest of agency official? Yes ☐ No ☐
Event Description:
Shares v Blues
Date(s) 12/21/19
Face Value of Each Ticket/Pass $ 117.00
Name of Source
San Jose Arena Authority

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>
<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>Dahl Volunteer Group</td>
<td>8</td>
<td>Recognition</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] [Print Name] [Title] 12/21/19

Comment: 
Agency Name: City of San Jose

Division, Department, or Region (if applicable): Council District 4

Designated Agency Contact (Name, Title): Andres Quintero, Chief of Staff

Area Code/Phone Number: (408) 525-4485
E-mail: andres.quintero@sanjoseca.gov

1. Agency Name

Division, Department, or Region (if applicable): Council District 4

Designated Agency Contact (Name, Title): Andres Quintero, Chief of Staff

Area Code/Phone Number: (408) 525-4485
E-mail: andres.quintero@sanjoseca.gov

2. Function or Event Information

Does the agency have a ticket policy? Yes □ No □ Face Value of Each Ticket/Pass: $ 50.00
Event Description: S.J. Barracuda: Reign
Ticket(s)/Pass(es) provided by agency? Yes □ No □ Date(s): 12/18/19
Was ticket distribution made at the behest of agency official? Yes □ No □ Name of Source: San Jose Arena Authority

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

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
Number of Ticket(s)/Passes
Describe the public purpose made pursuant to the agency’s policy

Environmental Services Dept. 24
Recognition

4. Verification

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

Signature of Agency Head or Designee: Maya Esparza
Print Name: Maya Esparza
Title: Councilmember
Date: 12/11/19

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
City of San Jose

Division, Department, or Region (if applicable)
Council District 7

Designated Agency Contact (Name, Title)
Andres Quintana, Chief of Staff

Area Code/Phone Number
(408) 535-4985
E-mail
andres.quintana@sanjose.ca.gov

2. Function or Event Information

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

Event Description: Sharks vs. Coyotes

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

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

Face Value of Each Ticket/Pass $ 117.00

Date(s) 12/17/19 12/17/19

Name of Source
San Jose Arena Authority

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.

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<tr>
<th>A. Name of Agency, Department or Unit</th>
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<tr>
<td></td>
<td></td>
<td>Ceremonial Role □ Other □ Income □</td>
</tr>
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<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
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</tr>
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<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
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<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>Dahli Volunteer Group</td>
<td>8</td>
<td>Recognition</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

Councilmember Title

(month, day, year)

Comment: ________________________________
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)
Council District 7

Designated Agency Contact (Name, Title)
Andres Quinto, Chief of Staff

Area Code/Phone Number E-mail
(408) 685-4405 andres.quinto@sanjose.gov

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

Event Description: Sharks vs. NY Rangers
Provide Title/Explanation

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

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

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

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

African American Community Services Agency 24 Recognition

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

Signature of Agency Head or Designee: Maya Esparza
Print Name: Councilmember: (Month, day, year)
Title: 12/03/19

Comment:

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
## Function or Event Information

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

Event Description: Sharks vs. Capitals

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 Arena Authority

Face Value of Each Ticket/Pass: $17.00

Date(s): 12/03/19

## Recipients

**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

**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: Maya Esparza

Print Name: Maya Esparza

Title: Councilmember

Date: 12/03/19

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**
   - **Council District**
   - Designated Agency Contact (Name, Title):
     - Mike Medina, Community Relations Manager
   - Area Code/Phone Number: (408) 535-4947
   - E-mail: mike.medina@sanjose.ca.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 $** 50
   - **Event Description:** Barracuda Eagles
   - **Date(s)**: 11/28/19
   - **Ticket(s)/Pass(es) provided by agency?** Yes ☑ No ☐
   - **Name of Source**
   - **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.

<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>
<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></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>
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<th>C. Name of Outside Organization (include address and description)</th>
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</thead>
<tbody>
<tr>
<td>McLaughlin Corridor</td>
<td>24</td>
<td>Recognition</td>
</tr>
<tr>
<td>Neighborhood Association</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: ____________________
   - Print Name: ____________________
   - Title: ____________________
   - Date: ________________ (month, day, year)

Comment: ____________________________________________________________
Agency Name: City of San Jose

1. Function or Event Information

- Does the agency have a ticket policy? Yes □ No □
- Event Description: Barclays y Jacob
- Face Value of Each Ticket/Pass $ 50.00
- Date(s): 11/17/19
- Ticket(s)/Pass(es) provided by agency? Yes □ No □
- If no: San Jose Arena Authority
- Was ticket distribution made at the behest of agency official? Yes □ No □

2. Recipients

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 □
- 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
---|---|---
West Evergreen Neighborhood Association 24 Recognition

4. Verification

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

Maya Espana Signature of Agency Head or Designee
Councillor Title
11/19/19 (month, day, year)
### Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

**1. Agency Name**
City of San Jose

**Division, Department, or Region (if applicable)**
Council District 4

**Designated Agency Contact (Name, Title)**
mike.medina, Community Relations Manager

**Area Code/Phone Number**
(408) 535-4997

**E-mail**
mike.medina@sanjose.ca.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:** $50.00
- **Event Description:** Barracuda vs. Lancers
- **Date(s):** 10/30/19
- **Ticket(s)/Pass(es) provided by agency?** Yes [ ] No [ ]
- **Name of Source:** San Jose Arena Authority
- **If no:**
  - **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

- **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 [ ]

- **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

  ** elementary School**

### 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:**
Maya Esparza

**Print Name:**
Maya Esparza

**Title:**
Councilmember

**Date:**
10/23/19

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

1. Agency Name
   City of San Jose
   Council District 7
   Mike Medina, Community Relations Manager
   Area Code/Phone Number (408) 535-4997
   E-mail mike.medina@sanjose.ca.gov

2. Function or Event Information
   - Does the agency have a ticket policy? Yes ☐ No ☒
   - Event Description: Anveld HA
   - Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   - Was ticket distribution made at the behest of agency official? Yes ☐ No ☒
   - Face Value of Each Ticket/Pass $ 153.00
   - Date(s) 10/18/2019
   - Name of Source San Jose Arena Authority

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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<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>Santee Neighborhood Association</td>
<td>20</td>
<td>Recognition</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

   Date 10/18/19

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

1. Agency Name
City of San Jose

Division, Department, or Region (if applicable)
Council District 7

Designated Agency Contact (Name, Title)
Mike Medina, Community Relations

Area Code/Phone Number  (408) 535-4997
E-mail: mike.medina@sanjose-ca.gov

2. Function or Event Information

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

Face Value of Each Ticket/Pass $ 50

Event Description: Barracuda vs. Condors

Date(s) 10/13/19

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

If no: San Jose Arena Authority

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.

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

Parking Compliance 24
Recognition

4. Verification

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

Maya Espana, Councilmember

Signature of Agency Head or Designee

Phnt Name
Title

Comment:

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

Division/Department, or Region (if applicable)
Council District 7

Designated Agency Contact (Name, Title)
Mike Medina, Council Assistant

Area Code/Phone Number
(408) 535-4997

E-mail
mike.medina@sanjose.ca.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 $109.00

Event Description: Monster Jam

Date(s) of Event: 08/31/2019

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

If no: San Jose Arena Authority

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.

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<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>Valley Palm Unidos</td>
<td>21</td>
<td>Recognition</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

Councilmember

Title

(month, day, year)

Comment: ____________________________

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

### Division, Department, or Region (if applicable)
Council District 7

### Designated Agency Contact (Name, Title)
Andres Quintero

### Area Code/Phone Number
(408) 535-4902

### E-mail
Andres. Quintero @ sanjoseca.gov

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

### Face Value of Each Ticket/Pass
$ 69.50

### Event Description:
Freestyle Explosion

### Date(s)
07/13/2019

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

### Name of Source
San Jose Arena Authority

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

### Name of Individual (Last, First)

### Number of Ticket(s)/Passes

### Identify one of the following:

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

### Ceremonial Role [ ]

### Other [ ]

### Income [ ]

### Name of Outside Organization (include address and description)
D7 Volunteers

### Number of Ticket(s)/Passes
24

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

### 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
Maya Esperanza

Title
Councilmember

Date
07/11/19

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

1. Agency Name
City of San Jose
Council District 7
Andres Quintero
Area Code/Phone Number: (408) 535-4902
E-mail: andres.quintero@sanjose.ca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes □ No □
Event Description: Wisin + Yandel
Face Value of Each Ticket/Pass $183.50
Ticket(s)/Pass(es) provided by agency? Yes □ No □
Was ticket distribution made at the behest of agency official? Yes □ No □

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
---|---|---

B. Name of Individual (Last, First) | Number of Ticket(s)/Passes | Identify one of the following:
---|---|---
Stefania Diaz | 1 | Ceremonial Role □ Other □ Income □
Mike Medina | 1 | 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
Seven Trees Community Center Teens Program | 14 | Recognition

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
Maya Esparza Councilmember 5/14/19
Print Name: Maya Esparza
Title: Councilmember

Comment:
Agency Name: City of San Jose
Division, Department, or Region (if applicable): Council District 7
Desgnated Agency Contact (Name, Title): Andres Quintano
Area Code/Phone Number: (408) 535-4902
E-mail: andres.quintano@sanjose.ca.gov

Function or Event Information:
- Does the agency have a ticket policy? Yes □ No □
- Event Description: Stars on ice
- Face Value of Each Ticket/Pass: $16.00
- Date(s): 5/12/19
- Was ticket distribution made at the behest of agency official? Yes □ No □

Recipients:
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

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: Maya Esparza
Print Name: Maya Esparza
Title: Councilmember
Date: 5/14/19

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)
Council District 7

Designated Agency Contact (Name, Title)
Andres Quintero

Area Code/Phone Number E-mail
(408) 535-4902 andres.quintero@sanjose.ca.gov

2. Function or Event Information

Does the agency have a ticket policy? Yes □ No □ Face Value of Each Ticket/Pass $201.00

Event Description: Sharks vs. Avalanche Date(s) 4, 28, 19

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:

Name of Source
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

Syvandale Middle School 8 Recognition

4. Verification

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

Maya Esparza Councilmember 5/6/2019

Signature of Agency Head or Designee Print Name Title (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

1. Agency Name: City of San Jose

Division, Department, or Region (if applicable): Council District 7

Designated Agency Contact (Name, Title): Andres Quintero

Area Code/Phone Number: (408) 535-4902
E-mail: andres.quintero@sanjose.ca.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 $204

- Event Description: Bellator MMA
  - Date(s): 4/27/2019

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

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

3. Recipients

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

<table>
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<tbody>
<tr>
<td>Franklin-McKinley School District</td>
<td>8</td>
<td>Recognition</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: Maya Esparza
Print Name: Maya Esparza
Title: Council member
Date (month, day, year): 5/6/2019

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

1. Agency Name
City of San Jose
Division, Department, or Region (if applicable)
Council District 7
Designated Agency Contact (Name, Title)
Andres Quintero
Area Code/Phone Number E-mail
(408) 535-4902 Andres.Quintero@sanjose.ca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes □ No □
Face Value of Each Ticket/Pass $ 50.00
Event Description: Barracuda vs. Reign Game
Date(s) 3/29/2019
Ticket(s)/Pass(es) provided by agency? Yes □ No □
Name of Source: San Jose Arena Authority
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.

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

Alma Neighborhood Association 24 - Recognition

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

Signature of Agency Head or Designee
Maya Esparza Councilmember
Print Name
Title
Date (month, day, year) 3/4/2019

Comment:

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Name: City of San Jose
Division, Department, or Region: Council District 7
Designated Agency Contact: A. Quiñero
Area Code/Phone Number: (408) 535-4902
E-mail: Andres. Quintero@sanjose.ca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes [ ] No [ ]
Face Value of Each Ticket/Pass: $115
Event Description: Sharks vs. Blackhawks
Date(s): 3/28/2019
Ticket(s)/Pass(es) provided by agency? Yes [ ] No [ ]
Was ticket distribution made at the behest of agency official? Yes [ ] No [ ]

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
---|---|---
B. Name of Individual (Last, First) | Number of Ticket(s)/Passes | Identify one of the following:
| Ceremonial Role [ ] Other [ ] Income [ ]
| 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
Los Lagos Residents | 8 | Recognition

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

Signature: Maya Esparza
councilmember
Print Name: Maya Esparza
title: councilmember
Date: 8/4/19

Comment:
Agency Name: City of San Jose
Division, Department, or Region (if applicable): Council District 7
Designated Agency Contact (Name, Title): Andres Quintero
Area Code/Phone Number: (408) 535-4902
E-mail: Andres.Quintero@sanjose.ca.gov

2. Function or Event Information

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

Event Description: Sharks v. Canadians

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

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

Face Value of Each Ticket/Pass: $225/ticket and $82/ticket

Date(s): 3/7/19

Name of Source: San Jose Arena Authority

Official's Name (Last, First): [ ]

3. Recipients

<table>
<thead>
<tr>
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<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>Rebuilding Together</td>
<td>24</td>
<td>Recognition</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 Officer, Designee, or Designee]
Print Name: Maya Esparza
Title: Councilmember
Date: 3/5/19

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

1. Agency Name: City of San Jose
   Division, Department, or Region (if applicable): Council District 7
   Designated Agency Contact (Name, Title): Andres Quintero
   Area Code/Phone Number: (408) 535-4907
   E-mail: andres.quintero@sanjose.ca.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes □ No □
   Face Value of Each Ticket/Pass $ 50 □
   Event Description: Barracuda v. Condors
   Date(s): 3/6/2019
   Ticket(s)/Pass(es) provided by agency? Yes □ No □
   If no: Name of Source: San Jose Arena Authority
   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.
   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
      
      
      
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: Maya Esparza
   Print Name: Councilmember
   Title: 3/4/2019
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)
Coun District
Designated Agency Contact (Name, Title)
Andres Quintana
Area Code/Phone Number E-mail
408-535-4902 andre quin tana@sanjoseca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes □ No □ Face Value of Each Ticket/Pass $
Event Description: Disney on Ice Date(s) 2/13/19
Ticket(s)/Pass(es) provided by agency? Yes □ No □ Name of Source
Was ticket distribution made at the behest of agency official? Yes □ No □ Official's Name (Last, First)

3. Recipients

<table>
<thead>
<tr>
<th>A.</th>
<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>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B.</th>
<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></td>
<td>Ceremonial Role □ Other □ Income □</td>
</tr>
<tr>
<td></td>
<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></td>
<td>Ceremonial Role □ Other □ Income □</td>
</tr>
<tr>
<td></td>
<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.</th>
<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>Tropicana Loma</td>
<td>24</td>
<td>Recognition</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
MAYA ESPINAL, COUNCILMEMBER 2/12/2019
Print Name
Title
(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

1. Agency Name
Office of Councilmember Espaillat
Division, Department, or Region (if applicable)
District 1
Designated Agency Contact (Name, Title)

Area Code/Phone Number 408 535 4907 E-mail andre@samjones

2. Function or Event Information
Does the agency have a ticket policy? Yes □ No □ Face Value of Each Ticket/Pass $ 53
Event Description: Disney on Ice Date(s) 2-22-19
Ticket(s)/Pass(es) provided by agency? Yes □ No □ If no: SJ ACAENH AUTHORITY Name of Source
Was ticket distribution made at the behest of agency official? Yes □ No □ If yes: Official's Name (Last, First)

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

<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>
<tr>
<td>B. Name of Individual (Last, First)</td>
<td>Number of Ticket(s)/Passes</td>
<td>Identify one of the following:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role □ Other □ Income □</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role □ Other □ Income □</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role □ Other □ Income □</td>
</tr>
<tr>
<td>C. Name of Outside Organization (Include address and description)</td>
<td>Number of Ticket(s)/Passes</td>
<td>Describe the public purpose made pursuant to the agency's policy</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<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 Print Name Title (month, day, year)

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

1. Agency Name
Office of Council member

Division, Department, or Region (if applicable)
District

Designated Agency Contact (Name, Title)

Area Code/Phone Number
408 535-4407

2. Function or Event Information

Does the agency have a ticket policy? Yes ☐ No ☐
Face Value of Each Ticket/Pass $50
Event Description: Kansas U Gulls
Date(s) 2/18/19
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐
Name of Source San Jose Arena Authority
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>
<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></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></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>Rock Springs Neighbourhood Assoc.</td>
<td>24</td>
<td>Recognition</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.
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
City of San Jose
Division, Department, or Region (if applicable)
CEREMONY DISTRICT
Designated Agency Contact (Name, Title)
A. Waite
Area Code/Phone Number 408-535-4907
E-mail awaite@sanjose.ca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes □ No □
Ticket(s)/Pass(es) provided by agency? Yes □ No □
Face Value of Each Ticket/Pass $15.00
Event Description: Sharks v. Bruins
Provide Title/Explanation
Date(s) 2/18/19
Ticket(s)/Pass(es) provided by agency? Yes □ No □
If no:
Name of Source San Jose Arena Authority
If yes:
Official’s Name (Last, First)

3. Recipients
A. Name of Agency, Department or Unit
Number of Ticket(s)/Passes

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
NAYA ESPARZA COUNCILMEMBER 2/12/19
Print Name
NAYA ESPARZA
Title (month, day, year)

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

1. Agency Name
   City of San Jose
   Division, Department, or Region (If Applicable)
   Council District 7
   Designated Agency Contact (Name, Title)
   Louansee Moua, Chief of Staff

2. Function or Event Information
   Does the agency have a ticket policy?
   Yes ☑ No ☐
   Event Description
   Sharks vs. Los Angeles Kings
   Ticket(s)/Pass(es) provided by agency?
   Yes ☑ No ☐
   Face Value of Each Ticket/Pass $
   $139
   Date(s)
   04 / 03 / 14
   Name of Source
   San Jose Arena Authority
   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)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
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<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)/Pass(es)</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>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></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)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operation Prom Dress Volunteers</td>
<td>8</td>
<td>Volunteer Appreciation</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] Louansee Moua
   Print Name Chief of Staff
   Title
   04/08/2014 (Month, Day, Year)

   Comment:
**Agency Report of:**

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

1. **Agency Name**
   
   City of San Jose

   **Division, Department, or Region (If Applicable)**
   
   Council District 7

   **Designated Agency Contact (Name, Title)**
   
   Louansee Moua, Chief of Staff

   **Area Code/Phone Number**
   
   408-535-4985

   **E-mail**
   
   Louansee.Moua@sanjoseca.gov

2. **Function or Event Information**

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

   **Event Description**
   
   Disney on Ice

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

   **Face Value of Each Ticket/Pass $**
   
   82

   **Date(s)**
   
   2 / 22 / 14

   **If no:**
   
   San Jose Arena Authority

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

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

   - **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

     McLaughlin Area Tenants Association

     16

     Volunteer Appreciation

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**
   
   Louansee Moua

   **Print Name**
   
   Chief of Staff

   **Title**
   
   3/4/2014

   **Date of Filing**

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

1. Agency Name
City of San Jose

Division, Department, or Region (If Applicable)
Council District 7

Designated Agency Contact (Name, Title)
Louansee Moua, Chief of Staff

Area Code/Phone Number
408-535-4985

E-mail
louansee.moua@sanjoseca.gov

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

Event Description
Harlem Globetrotters

Face Value of Each Ticket/Pass $

Harlem Globetrotters

Date(s) 1/18/14

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

San Jose Arena Authority

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

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

B. Name of Individual (Last, First)

Number of Ticket(s)/Pass(es)

Identify one of the following:

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

- Ceremonial Role [ ] Other [ ] 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

District 7 Youth Commission Advisory Board

15 Volunteer Recognition

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

Signature of Agency Head or Designee
Louansee Moua

Print Name
Chief of Staff
Title
1/21/2014

(Month, Day, Year)

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

1. Agency Name
City of San Jose
Division, Department, or Region (If Applicable)
Council District 7
Designated Agency Contact (Name, Title)
Louansee Moua, Chief of Staff
Area Code/Phone Number (408) 535-4985
E-mail louansee.moua@sanjoseca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes [X] No [ ]
Event Description Selena Gomez
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 $________
Date(s) 11/10/13
Name of Source San Jose Arena Authority
If no: San Jose Arena Authority
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>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>Quyen Ngo</td>
<td>15</td>
<td>Volunteer Recognition</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 Louansee Moua Chief of Staff 11/7/2013
Print Name Title (Month, Day, Year)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
City of San Jose
Council District 7

Designated Agency Contact (Name, Title)
Louansee Moua, Chief of Staff
Area Code/Phone Number (408) 535-4985
E-mail louansee.moua@sanjoseca.gov

2. Function or Event Information

Does the agency have a ticket policy? [ ] Yes [ ] No
Event Description Disney on Ice
Ticket(s)/Pass(es) provided by agency? [ ] Yes [ ] No
Was ticket distribution made at the behest of agency official? [ ] No [ ] Yes

Face Value of Each Ticket/Pass $ 
Date(s) 10/25/13
San Jose Arena Authority

Name of Source

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:

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

Senter Creekside NAC 16 Volunteer Recognition

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

Signature of Agency Head or Designee: Louansee Moua, Chief of Staff
Print Name: Signature Date: 11/5/2013

Comment: 

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
## Agency Name
City of San Jose

### Division, Department, or Region (If Applicable)
Council District 7

### Designated Agency Contact (Name, Title)
Louansee Moua, Chief of Staff

### Area Code/Phone Number
408-535-4985

### E-mail
louansee.moua@sanjoseca.gov

## Function or Event Information

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

### Event Description
Sharks vs Vancouver

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

### Face Value of Each Ticket/Pass
- $192.00

### Date(s)
- 10 / 03 / 13

### If no:
San Jose Arena Authority

### Name of Source

### If yes:
- [ ] No
- [x] Yes

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

### Official's Name (Last, First)

## Recipients

### 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>
</tr>
</thead>
</table>

### B. Name of Individual

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Ceremonial Role</th>
<th>Other</th>
<th>Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Madison Nguyen</td>
<td>1</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Puck Toss and recognition of City of San Jose</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role</td>
<td>Other</td>
<td>Income</td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></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>2013 Youth Job Fair Volunteers</td>
<td>24</td>
<td>Volunteer Recognition</td>
</tr>
</tbody>
</table>

## 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: Louansee Moua

Chief of Staff: Louansee Moua

Date: 10/2/2013

Print Name: Louansee Moua

Title: Chief of Staff

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

1. Agency Name
City of San Jose
Division, Department, or Region (If Applicable)
Council District 7
Designated Agency Contact (Name, Title)
Louansee Moua, Chief of Staff
Area Code/Phone Number 408-535-4985
E-mail louansee.moua@sanjoseca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes [ ] No [ ]
Event Description Ringling Brothers Barnum & Bailey Circus
Ticket(s)/Pass(es) provided by agency? Yes [ ] No [ ]
Was ticket distribution made at the behest of agency official? No [X] Yes [ ]

3. Recipients

<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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<tbody>
<tr>
<td>(Use Section A to identify the agency's department or unit.)</td>
<td>(Use Section B to identify an individual.)</td>
<td>(Use Section C to identify an outside organization.)</td>
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</tbody>
</table>

<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>Quyen Ngo</td>
<td>1</td>
<td>Ceremonial Role [X] Other [ ] Income [ ]</td>
</tr>
</tbody>
</table>

<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>Lucretia Area Neighborhood Group</td>
<td>16</td>
<td>Volunteer Recognition</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.

Louansee Moua, Chief of Staff
8/29/2013

Comment:

FPPC Form 802 (4/12)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
City of San Jose
Division, Department, or Region (If Applicable)
Council District 7

Designated Agency Contact (Name, Title)
Louansee Moua, Chief of Staff
Area Code/Phone Number 408-535-4985
E-mail louansee.moua@sanjoseca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes [ ] No [ ]
Face Value of Each Ticket/Pass $92.50
Event Description The Package Tour
Provide Title/Explanation

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

Was ticket distribution made at the behest of agency official? No [ ] Yes [ ]
If yes: San Jose Arena Authority
Name of Source

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>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>Lanai Cunningham Neighborhood Assoc.</td>
<td>16</td>
<td>Volunteer Recognition</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.

Louansee Moua, Chief of Staff
10/2/2013

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

### 1. Agency Name
City of San Jose

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

Council District 7

### Designated Agency Contact (Name, Title)
Louansee Moua, Chief of Staff

### Area Code/Phone Number
408-535-4985

### E-mail
louansee.moua@sanjoseca.gov

### 2. Function or Event Information

- **Does the agency have a ticket policy?** Yes [ ] No [ ]
- **Event Description** Super Freestyle Explosion
- **Face Value of Each Ticket/Pass** $45
- **Date(s)** 6 / 29 / 13
- **San Jose Arena Authority**
  - **Name of Source**
  - **Official's Name (Last, First)**

### 3. Recipients

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

<table>
<thead>
<tr>
<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>
<td></td>
</tr>
</tbody>
</table>

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

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

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

<table>
<thead>
<tr>
<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>
<td></td>
</tr>
</tbody>
</table>

- **RockSprings Neighborhood Group**
  - **Number of Ticket(s)/Pass(es)** 16
  - **Volunteer Recognition**

### 4. Verification

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

**Signature:** Louansee Moua

**Print Name:** Chief of Staff

**Title:**

**Date:** 8/29/2013 (Month, Day, Year)

**Comment:**
### Agency Name
City of San Jose

### Designated Agency Contact (Name, Title)
Noelle Vergara, Policy Analyst

<table>
<thead>
<tr>
<th>Area Code/Phone Number</th>
<th>E-mail</th>
</tr>
</thead>
<tbody>
<tr>
<td>(408) 535-4961</td>
<td><a href="mailto:noelle.vergara@sanjoseca.gov">noelle.vergara@sanjoseca.gov</a></td>
</tr>
</tbody>
</table>

### Function or Event Information

<table>
<thead>
<tr>
<th>Does the agency have a ticket policy?</th>
<th>Yes [ ] No [ ]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Event Description</td>
<td>Sharks vs. Canucks</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Ticket(s)/Pass(es) provided by agency?</th>
<th>Yes [ ] No [ ]</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Was ticket distribution made at the behest of agency official?</th>
<th>No [ ] Yes [ ]</th>
</tr>
</thead>
</table>

### Face Value of Each Ticket/Pass $ 166/103

<table>
<thead>
<tr>
<th>Date(s)</th>
<th>05 / 07 / 13</th>
</tr>
</thead>
</table>

### Recipients

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

<table>
<thead>
<tr>
<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>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Ceremonial Role [ ] Other [ ] Income [ ]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inzunza, Diego</td>
<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Ceremonial Role [ ] Other [ ] Income [ ]</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
</tr>
</tbody>
</table>

#### C. Name of Outside Organization (include address and description)

<table>
<thead>
<tr>
<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>McLaughlin Area Tenants/ FMCI Youth Group</td>
<td>volunteer recognition for youth fair and litter pick up</td>
</tr>
</tbody>
</table>

### 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**
Lounsee Moua

**Print Name**
Chief of Staff

**Title**
(Area Code) 05/13/13

**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
   City of San Jose
   Division, Department, or Region (If Applicable)
   Council District 7
   Designated Agency Contact (Name, Title)
   Noelle Vergara, Policy Analyst
   Area Code/Phone Number
   (408) 535-4907
   E-mail
   noelle.vergara@sanjoseca.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☐ No ☐
   Event Description
   Sharks vs. Kings
   Provide Title/Explanation
   Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐
   If no:
   Name of Source
   If yes:
   Was ticket distribution made at the behest of agency official? No ☐ Yes ☐
   Official’s Name (Last, First)

3. Recipients
   Name of Agency, Department or Unit

   Number of Ticket(s)/Pass(es) Provided
   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:
   Ceremonial Role ☐ Other ☐ Income ☐
   If checking “Ceremonial Role” or “Other” describe below:

   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
   Rocksprings Neighborhood Association
   8
   Recognition for their volunteer clean up efforts

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/Delegated Authority
   Louansee Moua
   Chief of Staff
   03/18/2013
   Title
   (Month, Day, Year)

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

1. Agency Name
City of San Jose

Division, Department, or Region (If Applicable)
Council District 7

Designated Agency Contact (Name, Title)
Noelle Vergara, Policy Analyst

Area Code/Phone Number
(408) 535-4907

E-mail
noelle.vergara@sanjoseca.gov

2. Function or Event Information

<table>
<thead>
<tr>
<th>Does the agency have a ticket policy?</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Face Value of Each Ticket/Pass $</td>
<td>80</td>
</tr>
<tr>
<td>Event Description</td>
<td>Disney on Ice: Dare to Dream</td>
</tr>
<tr>
<td>Date(s)</td>
<td>02 / 23 / 13</td>
</tr>
</tbody>
</table>

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

<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>A.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<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>Moua, Louansee</td>
<td>2</td>
<td>Ceremonial Role [x] Other [ ]</td>
</tr>
</tbody>
</table>

<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>Santee Youth Group</td>
<td>14</td>
<td>Volunteer recognition</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: Louansee Moua

Chief of Staff: March 20, 2013
### Agency Report of:
**Ceremonial Role Events and Ticket/Pass Distributions**

1. **Agency Name**
   - City of San Jose

2. **Council District**
   - District 7

3. **Designated Agency Contact (Name, Title)**
   - Noelle Vergara, Policy Analyst

4. **Area Code/Phone Number**
   - (408) 535-4961

5. **E-mail**
   - noelle.vergara@sanjoseca.gov

6. **Event Information**
   - **Sharks vs. Coyotes 09**
   - **Date(s)**: 02/09/13
   - **Face Value of Each Ticket/Pass**: $130.00
   - **Ticket(s)/Pass(es)** provided by agency?: Yes
   - **Was ticket distribution made at the behest of agency official?**: No

7. **Recipients**
   - **Name of Agency, Department or Unit**
     - **Number of Ticket(s)/Pass(es)**
     - **Describe the public purpose made pursuant to the agency's policy**
       - D7 Youth Advisory Council: Recognition for their efforts in hosting litter pick-up, graffiti clean ups and volunteering for district events

8. **Verification**
   - **Signature of Agency Head or Designee**: Louansee Moua
   - **Chief of Staff**: 02/12/13

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**FPPC Form 802 (4/12)**

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