

Tickets Provided by Agency Report

A Public Document

TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
City of Chula Vista		JUN 21 2012	
Division, Department, or Region (if applicable)			
City Manager's Office			
Street Address			
276 Fourth Avenue		<input type="checkbox"/> Amendment (Must explain in Part 5.)	
Area Code/Phone Number	E-mail	Date of Original Filing: <u>6/18/12</u> <small>(month, day, year)</small>	
619-691-5031	dtoledo@chulavistaca.gov		
Agency Contact (name and title)			
Donna Toledo, Ticket Administrator Designee			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 8 / 9 / 12 Description of Event: Toby Keith Concert

Face Value of Ticket: \$ 200.00

Agency Event Yes No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Live Nation

Number of Tickets Received: 24 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: James D. Sandoval, City Manager

Name of Individual or Organization: Nine Girls Ask? Number of Tickets: 2

Description of Organization: Educate, raise awareness and raise funds for research for the cure for ovarian cancer

Address of Organization: PO Box 212901, Chula Vista, CA 91921

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
Council Policy #161-01 III.A.2.j. - recognize community svcs organizations providing svcs or benefit to the city & residents

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

 James D. Sandoval City Manager 6/17/12
Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)