

**Tickets Provided by Agency Report**

**A Public Document**

TICKETS PROVIDED BY AGENCY REPORT

|   |  |   |   |
|---|--|---|---|
| <b>1. Agency Name</b><br>City of Chula Vista<br>Division, Department, or Region (if applicable)<br>City Manager's Office<br>Street Address<br>276 Fourth Avenue<br>Area Code/Phone Number<br>(619) 691-5031<br>Agency Contact (name and title)<br>Donna Toledo, Ticket Administrator Designee |  | Date Stamp<br><br>MAY 10 2012   | California Form <b>802</b><br>For Official Use Only |
| E-mail<br>dtoledo@chulavistaca.gov  |  | <input type="checkbox"/> Amendment (Must explain in Part 6.)<br>Date of Original Filing: <u>5/10/12</u><br>(month, day, year) |   |

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 5 / 27 / 12 Description of Event: I Love This City Music Festival  
 Face Value of Ticket: \$ 87.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: LiveNation  
 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: Wounded Warriors - Balboa Hospital Number of Tickets: 24  
 Description of Organization: honor and empower wounded warriors; entertain wounded soldiers  
 Address of Organization: 34225 Farenhold Ave., Bldg. 26, San Diego, CA 92134  
Number and Street City State Zip Code  
 Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

**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 5/10/12  
Print Name Title (month, day, year)

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