

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

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CITY CLERK'S OFFICE

1. Agency Name  
City of San Diego  
Division, Department, or Region (if applicable)  
Street Address  
202 C Street, 11th Floor, San Diego, CA 92101  
Designated Agency Contact (Name, Title)  
Rachel Shira, Exec. Assistant  
Area Code/Phone Number | E-mail  
619-236-6330

Date Stamp  
12 FEB -7 PM 1:00  
SAN DIEGO, CALIF.  
California Form 802  
For Official Use Only  
 Amendment (Must provide explanation in Part 3.)  
Date of Original Filing: \_\_\_\_\_  
(month, day, year)

2. Function, Event, or Ceremonial Role Information

Title All People's Breakfast  
Description Breakfast

Face Value of Each Admission \$ 40.00  
Date(s) 1 / 16 / 12

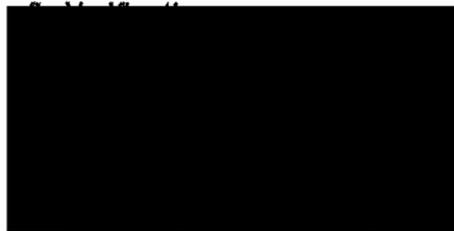
Ticket(s)/Admission(s) provided by agency? Yes  No  If no: San Diego Human Resources Commission  
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes  No  If yes: \_\_\_\_\_  
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. If not income, describe the public purpose, including ceremonial roles performed by an agency official, individual, or organization.
Mayor Jerry Sanders	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Ceremonial/Open to Public Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>



I have verified that the distribution of admissions, set forth above,

Rachel Shira Executive Assistant 1/26/12  
Print Name Title (month, day, year)

See the space for an amendment for any additional information including amendment explanation.)