

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

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<b>1. Agency Name</b> City of San Diego		Date Stamp <b>12 FEB -7 PM 1:11</b>	<b>California Form 802</b> For Official Use Only
Division, Department, or Region (if applicable) SAN DIEGO, CALIF.			
Street Address 202 C Street, 11th Floor, San Diego, CA 92101			
Designated Agency Contact (Name, Title) Rachel Shira, Exec. Assistant		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
Area Code/Phone Number 619-236-6330	E-mail	Date of Original Filing: _____ (month, day, year)	

**2. Function, Event, or Ceremonial Role Information**

Title Yantai Friendship Society Face Value of Each Admission \$ 50.00  
 Description New Year's Banquet Date(s) 2 / 6 / 12

Ticket(s)/Admission(s) provided by agency? Yes  No  If no: \_\_\_\_\_  
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 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"/>

**3. Verification**

Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above,

Rachel Shira Executive Assistant 2/7/12  
Print Name Title (month, day, year)

(Insert any additional information including amendment explanation.)