

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

A Public Document

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
San Diego Unified Port District			
Division, Department, or Region (if applicable)			
Street Address			
3165 Pacific Highway, San Diego, CA 92101			
Designated Agency Contact (Name, Title)		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
Tim Deuel, District Clerk		Date of Original Filing: _____ (month, day, year)	
Area Code/Phone Number	E-mail		
(619) 686-6206	publicrecords@portofsandiego.org		

2. Function, Event, or Ceremonial Role Information

Title 24th Annual All People's Breakfast Face Value of Each Admission \$ 40

Description _____ Date(s) 01 / 16 / 12 _____

Ticket(s)/Admission(s) provided by agency? Yes No If no: Equality Alliance of San Diego County
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	<ul style="list-style-type: none"> • 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. 	
Peters, Scott	1*	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	As part of the District's community outreach efforts.	Income <input type="checkbox"/>
Darbeau, Wayne	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	As part of the District's community outreach efforts.	Income <input type="checkbox"/>
Rosato, Jerine	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	As part of the District's community outreach efforts.	Income <input type="checkbox"/>
Finley, Deborah	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	As part of the District's community outreach efforts.	Income <input type="checkbox"/>
Grothen, Shirley	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	As part of the District's community outreach efforts.	Income <input type="checkbox"/>

3 _____
_____ations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above,
_____ Laura Nicholson Deputy District Clerk 02.17.12
_____ Print Name Title (month, day, year)

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

*Scott Peters reimbursed the District for the full face value of the ticket. **Indicates that one ticket was given to a member of the official's immediate family.

Continuation Sheet for: 24th Annual All People's Breakfast

Date(s) of Event: 01.16.12

2. Agency Official(s) Receiving Ticket(s)

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official (yes or no)	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.	Income
Valenzuela, Joel	1	yes	As part of the District's community outreach efforts.	<input type="checkbox"/>
Gonzalez, Alonzo	1	yes	As part of the District's community outreach efforts.	<input type="checkbox"/>
Bolduc, John	2**	yes	As part of the District's community outreach efforts.	<input type="checkbox"/>
Eli, Hope	1	yes	As part of the District's community outreach efforts.	<input type="checkbox"/>