

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

A Public Document

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

2. Function, Event, or Ceremonial Role Information

Title South County Community Network Breakfast **Face Value of Each Admission \$** 15.00

Description _____ **Date(s)** 3 / 30 / 12

Ticket(s)/Admission(s) provided by agency? Yes No If no: National City Chamber of Commerce
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. 	Income
	1*	Yes <input type="checkbox"/> No <input type="checkbox"/>	Representation of the District at an event to sustain or build relationships with tenants, businesses, or local, regional, state or federal agencies.	<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"/>

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

Laura Nicholson Deputy District Clerk 05.31.12
Print Name Title (month, day, year)

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

*Please note that 1 ticket to this event was not distributed or used.