

# Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions

A Public Document

<b>1. Agency Name</b> San Diego Unified Port District		Date Stamp	<b>California Form 802</b> For Official Use Only
Division, Department, or Region (If Applicable)			
Designated Agency Contact (Name, Title) Tim Deuel, District Clerk			
Area Code/Phone Number (619) 686-6206	E-mail publicrecords@portofsandiego.org	<input type="checkbox"/> <b>Amendment</b> (Must provide explanation in Part 3.) Date of Original Filing: _____ <small>(Month, Day, Year)</small>	

**2. Function or Event Information**

Does the agency have a ticket policy? Yes  No  Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 225

Event Description 14th Annual Change Their Lives Extravaganza "Havana Nights" Date(s) 10 / 5 / 12  
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes  No  If no: South Bay Community Services  
Name of Source

Was ticket distribution made at the behest of agency official? No  Yes  If yes: Moore, Ann  
Official's Name (Last, First)

**3. Recipients**  
 • Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual <small>(Last, First)</small>	Number of Ticket(s)/Pass(es)	Identify one of the following:
Moore, Ann	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Representation of the District at an event to sustain or build relationships with tenants, businesses, or local, regional, state or federal agencies.
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization <small>(include address and description)</small>	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
City of Chula Vista www.ci.chula-vista.ca.us/	6	As part of the District's community outreach efforts.
South Bay Community Services southbaycommunityservices.org/	2	As part of the District's community outreach efforts.

**4. Verification**  
 I have read and understand the FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

\_\_\_\_\_  
 Laura Nicholson  
Print Name

 \_\_\_\_\_  
 Deputy District Clerk  
Title

 \_\_\_\_\_  
 10-19-12  
(Month, Day, Year)