

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

A Public Document

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
City of Chula Vista			
Division, Department, or Region (If Applicable)		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: <u>6/7/13</u> <small>(Month, Day, Year)</small>	
City Manager's Office			
Designated Agency Contact (Name, Title)			
Yolanda Garcia, Ticket Administrator Designee			
Area Code/Phone Number	E-mail		
(619) 691-5031	ygarcia@chulavistaca.gov		

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 200.00

Event Description Channel 933 Summer Kick Off Concert Date(s) 5 / 10 / 13
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: LiveNation
Name of Source

Was ticket distribution made at the behest of agency official? No Yes If yes: Sandoval, James
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 (Last, First)	Number of Ticket(s)/Pass(es)	Identify one of the following:
Public Works/Operations - Claudia Block	2	Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Employee of the month - Employee Recognition/Appreciation (applicable city policy #161-01 III.A.2.b.)
		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 (include address and description)	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
South Bay Family YMCA, 1201 Paseo Magda, Chula Vista, CA 91910	2	Youth development, healthy living, and social responsibility (applicable city policy #161-01 III.A.2.c)
Chula Vista Library Foundation, 365 F St, Chula Vista, CA 91910	4	helping raise add'l funds for the library and its vital community programs (applicable city policy #161-01 III.A.2.c)

4. Verification

 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

James D. Sandoval City Manager 6/7/13
Print Name Title (Month, Day, Year)

Comment: _____

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 Continuation Sheet

Agency Name
 City of Chula Vista

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
		Employee of the month - Employee Recognition/Appreciation (applicable city policy #161-01 III.A.2.b.)

B. Name of Individual <i>(Last, First)</i>	Number of Ticket(s)/ Pass(es)	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
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C. Name of Outside Organization <i>(include address and description)</i>	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy
Chula Vista Community Collaborative 511 G Street, CV 91910	4	Collaborative of community services that protect the health and safety of residents (applicable city policy #161-01 III.A.2.c)