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

A Public Document

1. Agency Name

San Diego Unified Port District

Division, Department, or Region *(If Applicable)*

Designated Agency Contact *(Name, Title)*

Tim Deuel, District Clerk

Area Code/Phone Number	**E-mail**
(619) 686-6206	publicrecords@portofsandiego.org

Date Stamp

California Form 802

For Official Use Only

☐ **Amendment** *(Must provide explanation in Part 3.)*

Date of Original Filing: _____ *(Month, Day, Year)*

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐

Face Value of Each Ticket/Pass $ 150

Event Description 19th Annual Leadership Awards Gala
Provide Title/Explanation

Date(s) 1 / 24 / 13 ___/___/___

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒

If no: Japan Society
Name of Source

Was ticket distribution made at the behest of agency official? No ☒ Yes ☐

If yes: _____
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
Public Art	2	Representation of the District at an event to sustain or build relationships with tenants, businesses, or local, regional, state or federal agencies.

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Pass(es)	Identify one of the following:
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*

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

4. Verification

[redacted] *ons 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.*

[redacted]	Laura Nicholson	Deputy District Clerk	02.08.13
	Print Name	*Title*	*(Month, Day, Year)*

Comment: _____